

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Elect Keegan							
Full Name of Contributor Kenneth Smullen					Registration Number, if PAC		
Street Address 840 Highview Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43235	M 0	D 9	Y 2 2 0 7	Amount 40.00	
Full Name of Contributor James Barstow					Registration Number, if PAC		
Street Address 6705 Lakeside Circle West		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Worthington	State O H	Zip Code 43085	M 0	D 9	Y 2 3 0 7	Amount 25.00	
Full Name of Contributor Susan Petrick					Registration Number, if PAC		
Street Address 6519 Evering Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Worthington	State O H	Zip Code 43085	M 0	D 9	Y 2 1 0 7	Amount 50.00	
Full Name of Contributor Cynthia Craig					Registration Number, if PAC		
Street Address 926 Loch Ness Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Worthington	State O H	Zip Code 43085	M 0	D 9	Y 2 3 0 7	Amount 20.00	
Full Name of Contributor Mary I McCollum					Registration Number, if PAC		
Street Address 124 Armstrong Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Brunswick	State G A	Zip Code 31525	M 0	D 9	Y 2 9 0 7	Amount 100.00	
Full Name of Contributor Suzi Lucci					Registration Number, if PAC		
Street Address 2410 Collins Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Worthington	State O H	Zip Code 43085	M 0	D 9	Y 3 0 0 7	Amount 25.00	
Full Name of Contributor Tina Perese					Registration Number, if PAC		
Street Address 2421 Collins Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Worthington	State O H	Zip Code 43085	M 0	D 9	Y 2 5 0 7	Amount 50.00	
Full Name of Contributor Robert Burpee					Registration Number, if PAC		
Street Address 2377 Collins Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Worthington	State O H	Zip Code 43085	M 0	D 9	Y 2 4 0 7	Amount 25.00	

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must appear. {R.C. 3517.10(B)(4)}