

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Crysta Pennington									
Full Name of Contributor Joyce A. Clark						Registration Number, if PAC			
Street Address 1790 Bide-A-Wee Park			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Columbus		State OH	Zip Code 43205		M 1	D 0	Y 2	Y 4	Amount \$100.00
Full Name of Contributor LebaRae Shaw						Registration Number, if PAC			
Street Address 3140 Valerie Arms Drive, Apartment #1			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Dayton		State OH	Zip Code 45405		M 1	D 0	Y 2	Y 5	Amount \$50.00
Full Name of Contributor Mellissia Fuhrmann						Registration Number, if PAC			
Street Address 1849 Willoway Circle North			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) debit-paypal			
City Columbus		State OH	Zip Code 43220		M 1	D 0	Y 2	Y 5	Amount \$48.25
Full Name of Contributor Cornelius McGrady III						Registration Number, if PAC			
Street Address 8675 Kingley Drive			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Reynoldsburg		State OH	Zip Code 43068		M 1	D 0	Y 2	Y 5	Amount \$50.00
Full Name of Contributor Franklin County Democratic Lawyers Club						Registration Number, if PAC			
Street Address 1141 South High Street			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Columbus		State OH	Zip Code 43206		M 1	D 0	Y 2	Y 6	Amount \$500.00
Full Name of Contributor College Sense, LLP						Registration Number, if PAC			
Street Address 800 Cross Pointe, Suite "P"			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Gahanna		State OH	Zip Code 43230		M 1	D 0	Y 2	Y 6	Amount \$150.00
Full Name of Contributor Khari Engaro						Registration Number, if PAC			
Street Address 350 East 1st Avenue, Suite 100			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Columbus		State OH	Zip Code 43201		M 1	D 0	Y 2	Y 6	Amount \$75.00
Full Name of Contributor Friends for Ginther						Registration Number, if PAC			
Street Address 545 East Town Street			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Columbus		State OH	Zip Code 43215		M 1	D 0	Y 2	Y 7	Amount \$2,500.00

* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$3,473.25**