31-A
R.C. 3517.16

Page 3

Statement of Contributions Received

Prescribed by Secretary of State 3/11

Name of Committee in Full													
Friends of Sean McMullen													
Full Name of Contributor											Registration Number, if PAC		
Sean N. McMullen													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
9026 Trinity Circle												Credit Card	
City	State	Zip Code	M		D		Y					Amount	
Reynoldsburg	O H	43068	0	7	3	0	1	5				100.00	
Full Name of Contributor											Registration Number, if PAC		
Milroy Samuel													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
7708 Roxton Court												Credit Card	
City	State	Zip Code	M		D		Y					Amount	
New Albany	O H	43054	0	7	3	1	1	5				250.00	
Full Name of Contributor											Registration Number, if PAC		
Marlynnia McMullen													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
9026 Trinity Circle												Credit Card	
City	State	Zip Code	M		D		Y					Amount	
Reynoldsburg	O H	43068	0	7	3	1	1	5				1.00	
Full Name of Contributor											Registration Number, if PAC		
Sean N. McMullen													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
9026 Trinity Circle												Credit Card	
City	State	Zip Code	M		D		Y					Amount	
Reynoldsburg	O H	43068	0	8	1	3	1	5				20.00	
Full Name of Contributor											Registration Number, if PAC		
Deborah Dunlap													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
9140 McMahon Court												Credit Card	
City	State	Zip Code	M		D		Y					Amount	
Reynoldsburg	O H	43068	0	9	0	7	1	5				50.00	
Full Name of Contributor											Registration Number, if PAC		
Lee Cole													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
6088 Whitman Rd													
City	State	Zip Code	M		D		Y					Amount	
Columbus	O H	43213	0	9	1	6	1	5				50.00	
Full Name of Contributor											Registration Number, if PAC		
Tanya Wilson													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
8125 Burkart Court													
City	State	Zip Code	M		D		Y					Amount	
Greenbelt	M D	20770	0	9	1	8	1	5				150.00	
Full Name of Contributor											Registration Number, if PAC		
Adrienne Yates													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
2071 Wayfaring Drive													
City	State	Zip Code	M		D		Y					Amount	
Reynoldsburg	O H	43068	1	0	1	6	1	5				100.00	

* 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)]

Page Total $ 721.00