

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full O'Shaughnessy Committee							
Full Name of Contributor Huntington BancShares Inc					Registration Number, if PAC PAC C00165589		
Street Address 41 South High Street		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43215	M 0 3	D 0 3	Y 1 6	Amount 500.00	
Full Name of Contributor AFSCME Ohio Council 8					Registration Number, if PAC PAC LA 1273		
Street Address 6800 North High Street		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43085	M 0 3	D 0 1	Y 1 6	Amount 3,500.00	
Full Name of Contributor Daniel D Emch					Registration Number, if PAC		
Street Address 71 N Merkle Road		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43209	M 0 3	D 0 3	Y 1 6	Amount 200.00	
Full Name of Contributor Don L Brown					Registration Number, if PAC		
Street Address 3921 Lytham Ct		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Upper Arlington	State O H	Zip Code 43220	M 0 3	D 0 3	Y 1 6	Amount 100.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	

* 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 \$ 4,300.00