

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee to Elect Michael J. King							
Full Name of Contributor D. Michael Crites					Registration Number, if PAC		
Street Address 309 E. Whetstone Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Powell	State O H	Zip Code 43065	M 0 4	D 2 4	Y 0 7	Amount 35.00	
Full Name of Contributor Jeffrey A. Willis					Registration Number, if PAC		
Street Address 2020 Harwitch Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 4	D 2 5	Y 0 7	Amount 70.00	
Full Name of Contributor Diane E. Ray					Registration Number, if PAC		
Street Address 237 W Dunedin Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43214	M 0 4	D 2 9	Y 0 7	Amount 35.00	
Full Name of Contributor Michael J. Galeano					Registration Number, if PAC		
Street Address 6253 Muirloch Ct. S.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 0 7	D 0 9	Y 0 7	Amount 125.00	
Full Name of Contributor Michael L. Squillace					Registration Number, if PAC		
Street Address 7217 Hopewell St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 0 9	D 2 8	Y 0 7	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	

* 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)]