

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Preston Stearns For Reynoldsburg							
Full Name of Contributor Preston Stearns					Registration Number, if PAC		
Street Address 1020 Matterhorn Dr.		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Cash		
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 3	Y 1	Amount \$25.00	
Full Name of Contributor Connelius McGrady, III					Registration Number, if PAC		
Street Address 8675 Kingsley Dr.		Employer/Occupation/Labor Organization* Reynoldsburg City Council			Form (Cash, Check, etc.) Cash		
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 3	Y 1	Amount \$90.00	
Full Name of Contributor Preston Stearns					Registration Number, if PAC		
Street Address 1020 Matterhorn Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 3	Y 1	Amount \$500.00	
Full Name of Contributor Larry Brown					Registration Number, if PAC		
Street Address 6973 Nocturne Rd. N		Employer/Occupation/Labor Organization* State Of Ohio			Form (Cash, Check, etc.) Check		
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 3	Y 0	Amount \$500.00	
Full Name of Contributor Cornelius McGrady, III					Registration Number, if PAC		
Street Address 8675 Kingsley Dr.		Employer/Occupation/Labor Organization* Reynoldsburg City Council			Form (Cash, Check, etc.) Check		
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 4	Y 0	Amount \$960.00	
Full Name of Contributor G. Thomas Turner, Sr.					Registration Number, if PAC		
Street Address 6915 Prior Pl		Employer/Occupation/Labor Organization* Pastor Friendship Baptist Church			Form (Cash, Check, etc.) Check		
City Reynoldsburg	State OH	Zip Code	M 0	D 4	Y 1	Amount \$500.00	
Full Name of Contributor Scott Warwick					Registration Number, if PAC		
Street Address 1147 Matterhorn Dr.		Employer/Occupation/Labor Organization* Attorney-At-Law			Form (Cash, Check, etc.) Check		
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 5	Y 1	Amount \$250.00	
Full Name of Contributor Carlton & Carla Edwards					Registration Number, if PAC		
Street Address 986 Sandrock Ave.		Employer/Occupation/Labor Organization* Federal Government & State Auto Insurance Co.			Form (Cash, Check, etc.) Cash		
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 6	Y 2	Amount \$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 also appear. [R.C. 3517.10(B)(4)]