

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Crysta Pennington						
Full Name of Contributor Azure'd Metoyer				Registration Number, if PAC		
Street Address 100 Eastmoor Boulevard		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH <input checked="" type="checkbox"/>	Zip Code 43209	M 0	D 1	Y 2	Amount \$25.00
Full Name of Contributor Marcus M. Van Wey				Registration Number, if PAC		
Street Address 516 Elsmere Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH <input checked="" type="checkbox"/>	Zip Code 43206	M 0	D 1	Y 2	Amount \$300.00
Full Name of Contributor Jonathan W. Klein				Registration Number, if PAC		
Street Address 101 Heather Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Powell	State OH <input checked="" type="checkbox"/>	Zip Code 43065	M 0	D 1	Y 2	Amount \$50.00
Full Name of Contributor Ann McNeal				Registration Number, if PAC		
Street Address 376 Towne Court East		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State OH <input checked="" type="checkbox"/>	Zip Code 43230	M 0	D 1	Y 2	Amount \$25.00
Full Name of Contributor Camille E. Cook				Registration Number, if PAC		
Street Address 1340 Wagay Square		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Pataskala	State OH <input checked="" type="checkbox"/>	Zip Code 43062	M 0	D 1	Y 2	Amount \$50.00
Full Name of Contributor E. Darren McNeal, Co. LLC				Registration Number, if PAC		
Street Address 100 East Main Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH <input checked="" type="checkbox"/>	Zip Code 43215	M 0	D 1	Y 2	Amount \$60.00
Full Name of Contributor Helena Bush				Registration Number, if PAC		
Street Address 144 W. Tigonderoga Drive; Apt. F		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Westerville	State OH <input checked="" type="checkbox"/>	Zip Code 43081	M 0	D 1	Y 2	Amount \$100.00
Full Name of Contributor Eugene Williams, Jr.				Registration Number, if PAC		
Street Address 5717 Venizon Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Groveport	State OH <input checked="" type="checkbox"/>	Zip Code 43125	M 0	D 1	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)]