31-A
R.C. 3517.10

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Committee to Elect Sue Ralph							
Full Name of Contributor						Registration Number, if PAC	
Ruth A. Martin							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
3341 Mansion Way							Check
City	State	Zip Code	M	D	Y		Amount
Columbus	O | H	43221	10	08	16		25.00
Full Name of Contributor						Registration Number, if PAC	
David C. Fontana							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
2190 Cheltenham Rd.							Check
City	State	Zip Code	M	D	Y		Amount
Columbus	O | H	43220	10	08	16		50.00
Full Name of Contributor						Registration Number, if PAC	
John R. Stechschulte							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
2125 Lane Woods Dr.							Check
City	State	Zip Code	M	D	Y		Amount
Columbus	O | H	43221	10	08	16		100.00
Full Name of Contributor						Registration Number, if PAC	
Priscilla D. Mead							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
1399 La Rochelle Dr.							Check
City	State	Zip Code	M	D	Y		Amount
Columbus	O | H	43221	10	08	16		100.00
Full Name of Contributor						Registration Number, if PAC	
Yvonne S. Perotti							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
5849 Kingham Park							Check
City	State	Zip Code	M	D	Y		Amount
Dublin	O | H	43017	10	08	16		50.00
Full Name of Contributor						Registration Number, if PAC	
M. Jameson Crane							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
2289 Onandaga Drive							Check
City	State	Zip Code	M	D	Y		Amount
Columbus	O | H	43221	10	11	16		100.00
Full Name of Contributor						Registration Number, if PAC	
Kathy A. Meyer							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
1930 Concord Rd.							Check
City	State	Zip Code	M	D	Y		Amount
Columbus	O | H	43212	10	11	16		25.00
Full Name of Contributor						Registration Number, if PAC	
Ellen L. Erlanger							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
1930 Concord Rd.							Check
City	State	Zip Code	M	D	Y		Amount
Columbus	O | H	43212	10	11	16		25.00

* 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 $ 475.00