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								
O'Shaughnessy Committee								
Full Name of Contributor							**Registration Number, if PAC**	
R.K. Kerns								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
1902 Lake Shore Dr.							check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	O | H	43204	0 | 3	1 | 2	1 | 4		500.00	
Full Name of Contributor							**Registration Number, if PAC**	
John C. Rosenburger								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
885 S. Pearl St.							check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	O | H	43206	0 | 6	0 | 4	1 | 4		250.00	
Full Name of Contributor							**Registration Number, if PAC**	
Ty D. Marsh								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
57 Riverview Park Dr.							check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	O | H	43214	0 | 6	0 | 4	1 | 4		100.00	
Full Name of Contributor							**Registration Number, if PAC**	
Michael Scoliere								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
4603 Gwynedd Court							check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Dublin	O | H	43016	0 | 6	0 | 4	1 | 4		100.00	
Full Name of Contributor							**Registration Number, if PAC**	
Anne K. Jeffrey								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
296 Ashbourne Pl.							check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	O | H	43209	0 | 6	0 | 4	1 | 4		250.00	
Full Name of Contributor							**Registration Number, if PAC**	
Joseph M. Gentilini								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
2454 Meadow Glade Dr.							check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Hilliard	O | H	43206	0 | 6	0 | 4	1 | 4		50.00	
Full Name of Contributor							**Registration Number, if PAC**	
Baker & Hostetler LLP							OH125	
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
1900 E. 9 St. Ste 3200							check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Cleveland	O | H	44114	0 | 6	0 | 4	1 | 4		500.00	
Full Name of Contributor							**Registration Number, if PAC**	
Plumbers & Pipefitters LU 189							PCE #6220	
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
1250 Kinnear Rd.							check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	O | H	43212	0 | 6	0 | 4	1 | 4		500.00	

* 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 $ 2,250.00