3	1	-,	A		
R		٠.	35	17,	10

Statement of Contributions Received

	2
Page	<u> </u>

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens For Rankin				· -				
Full Name of Contributor	<u> </u>		Registration Number, if I	PAC				
Kilroy for Commissioner								
Street Address 3886 N. High Street	Employer/Occu	ipation/Labor Organization		Form (Cash, Check, etc.) Check				
City Columbus	Stake OH	Zip Code 43214	M D Y 1 0 5	Amount \$250.00				
Full Name of Contributor Registration Number, if F								
Friends of Sherrod Brown			Registration Number, 111					
et Address Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)				
607 14th Street, NW, Suite 800				Check				
City	State	Zip Code	M D Y	Amount				
Washington	DC	20005	1 0 3 1 0 5	\$100.00				
Full Name of Contributor Richard D. Gallagher	Registration Number, if PAC							
Street Address	Employer/Occu	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)				
373 W. 6th Avenue				Check				
City Columbus	State OH	Zip Code 43201	1 1 0 1 0 5	Amount \$500.00				
Full Name of Contributor	Registration Number, if	PAC						
John William Ferron								
Street Address	upation/Labor Organization		Form (Cash, Check, etc.)					
6262 Deeside Drive		Associates, LPA, Attorne		Check				
City Dublin	Stake OH	Zip Code 43017	1 1 0 2 0 5	Amount \$250.00				
Full Name of Contributor Registration Number, if PAC								
Laborers International Union of N.A. L	LA912							
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)				
620 Alum Creek Drive		In: a l		Check				
City Columbus	State OH	Zip Code 43205	1 1 0 2 0 5	Amount \$500.00				
Full Name of Contributor	!	!	Registration Number, if	PAC				
Richard L. Levine								
Street Address	Employer/Occu	upation/Labor Organization	 	Form (Cash, Check, etc.)				
2754 Bryden Road		evine Co., LPA, Attorney		Check				
City	State	Zip Code	M D Y	Amount				
Columbus	OH	43209	1 1 0 2 0 5	\$100.00				
Full Name of Contributor			Registration Number, if	PAC				
Curtis F. Gantz								
Street Address		Form (Cash, Check, etc.)						
175 S. Third Street	1 ' '	upation/Labor Organization* on & Horst, Attorney		Check				
City	State	Zip Code	M D Y	Amount				
Columbus	ОН	43215	1 1 0 2 0 5	\$400.00				
Full Name of Contributor Andrew L. Klein Registration Number, if PAC								
et Address Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)				
1090 Say Avenue	of Andrew L. Klein, Attorney		Check					
City	State	Zip Code	M D Y	Amount				
Columbus	OH	43201	1 1 0 2 0 5	\$500.00				

Page Total \$2,600.00

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)]