Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full McKinley for Judge					
Full Name of Contributor Cynthia L. Petersen	*****	•	Registration Number, if F	PAC	
Street Address 13101 Rustic Drive	Employer/Occupation/Labor Organization Education Reform Consultant, C		sultant, OEA	Form (Cash, Check, etc.) Check	
City Pickerington	State OH	Zip Code 43147	M D Y Y D 9 2 6 1 3	Amount \$200.00	
Full Name of Contributor Matthew M. Banal			Registration Number, if I	PAC	
Suren Address 5424 Olde Vintage Drive		Employer/Occupation/Labor Organization Attorney, Ohio Association of Public So		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	M D Y 0 9 3 0 1 3	Amount \$50.00	
Full Name of Contributor Robert Eblin				Registration Number, if PAC	
Street Address 230 Northmoor Place	Employer/Occupation/Labor Organization* Attorney, Baily Cavalieri LLC		C	Form (Cash, Check, etc.) Credit Card	
City Columbus	State OH	Zip Code 43214	1 0 0 4 1 3	Amount \$100.00	
Full Name of Contributor Thomas A. Grote	•		Registration Number, if I		
Street Address 982 Jaeger Street	Employer/Occupation/Labor Organization* Entrepreneur, Butylfuel LLC			Form (Cash, Check, etc.) Credit Card	
City Columbus	OH State	Zip Code 43206	M D Y 1 3	Amount \$100.00	
Full Name of Contributor Stephen Daley			Registration Number, if i	PAC	
Street Address 4377 Shire Creek Court	Employer/Occupation/Labor Organization* Financial Advisor, Ameriprise Finan		e Financial Services	Form (Cash, Check, etc.) Credit Card	
^{City} Hilliard	State OH	Zip Code 43206	1 0 0 4 1 3	1 - 1 - 1 - 1	
Full Name of Contributor Terry Penrod			Registration Number, if	Registration Number, if PAC	
Street Address 362 West Hubbard	Employer/Occupation/Labor Organization* Realtor, HER Realtors			Form (Cash, Check, etc.) Credit Card	
City Columbus	State OH	Zip Code 43215	M D Y ₁	Amount \$100.00	
Full Name of Contributor Lisa Zellner	· · · · · · · · · · · · · · · · · · ·		Registration Number, if	Registration Number, if PAC	
Street Address 2930 Woodson	Employer/Occupation/Labor Organization Dir. Of Comm., Ohio Fed of Teach		Teachers	Form (Cash, Check, etc.) Credit Card	
City Hilliard	State OH	Zip Code 43206	M D Y 1 3	Amount \$100.00	
Full Name of Contributor Yana Miller-Farney	· · · · · · · · · · · · · · · · · · ·		Registration Number, if		
Street Address 30 Winner Avenue		pation/Labor Organization* er Carrier, USPS		Form (Cash, Check, etc.) Credit Card	
City Columbus	State OH	Zip Code 43203	0 9 1 7 1 3	Amount \$50.00	

Page Total \$800.00

^{*} 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)]