3	1-	A	
R	C.	351	7.10

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full					
Elect Keegan					
Full Name of Contributor			1		
			Registration Number, if PAC		
Nicole Porter					
		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
659 Oxford St					check
City	State	Zip Code		D Y	Amount
Worthington		H 43085	0 9 2	18 017	25.00
Full Name of Contributor			Registration	Number, if PA	AC .
Patricia McFarland					
Street Address	Employer/Oc	cupation/Labor Organization	·		Form (Cash, Check, etc.)
279 Highgate Ave				1	check
City	State	Zip Code	МТ) Y	Amount
Worthington	101	1 43085	اماماء	10 017	25.00
Full Name of Contributor		15000		Number, if PA	
Robert Mottice				ramber, ir i j	••
Street Address	Employer/Oc	cupation/Labor Organization	. 	-	Form (Cash, Check, etc.)
1024 Hartford St	Zinployenoe	capation capor organization			
City	State	Zip Code	MI	<u> </u>	check
Worthington	I .	1 43085			Amount
Full Name of Contributor	1011	1 43063	01913		20.00
· · · · · · · · · · · · · · · · · · ·			Registration	Number, if PA	AC .
George Norris	le i la				
Street Address	Employer/Occupation/Labor Organization*		•		Form (Cash, Check, etc.)
					cash
City	State	Zip Code	MI	_	Amount
			0 9 2	19 0 7	20.00
Full Name of Contributor			Registration	Number, if PA	NC
Michelle Corbin					
Street Address	Employer/Oc	cupation/Labor Organization	•		Form (Cash, Check, etc.)
	<u> </u>				cash
City	State	Zip Code	M I		Amount
			0 9 2	18 0 7	10.00
Full Name of Contributor				Number, if PA	AC
Abramo Ottolenghi					
Street Address	Employer/Oc	cupation/Labor Organization	•		Form (Cash, Check, etc.)
570 Hartford St					check
City	State	Zip Code	М) Y	Amount
Worthington	0 1			12 017	
Full Name of Contributor	1 0 1	10000		Number, if PA	
Jacqueline M Orlando			, and the second		••
Street Address	Employer/Oc	cupation/Labor Organization		_	Form (Cash, Check, etc.)
???? Troon Trail					check
City	State	Zip Code	MI) Y	Amount
1 *		43085			
Worthington	O 1	1 43065		13 017	50.00
Full Name of Contributor			Kegistration	Number, if PA	ıc
Ruthann Norris	la				In
et Address Employer/Occupation/Labor Organization*		•		Form (Cash, Check, etc.)	
262 Highgate Ave		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		· · ·	check
City	State	Zip Code) Y	Amount
Worthington	0 1	H 43085	[1 0 0	12 017	50.00

* 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 \$	225.00