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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							· · · · · · · · · · · · · · · · · · ·
Citizens for Dorrian Committee							
Full Name of Contributor		Registration Number, if PAC					AC
Hugh J. Dorrian							
Street Address	Employer/Occu	ipation/Labor Organization*					Form (Cash, Check, etc.)
999 Birchmont Rd	City Au						Check
City	State	Zip Code	М	D	Т	Y	Amount
Columbus	OH	, ·	0 3	- 1	<u>و</u> ا	1 3	3,000.00
Full Name of Contributor		20220	r, if P				
Fundraiser(see 31 E)				1600	u	.,	
Street Address	Employer/Occu	pation/Labor Organization*					Form (Cash, Check, etc.)
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City	State	Zip Code	М	D		Y	Amount
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Full Name of Contributor		<u> </u>	0 4	_	_	3	
ruli Name of Controllor			Kegisu	ration No	ımber	, 11 PF	AC .
Street Address	Employer/Occur	pation/Labor Organization*					7 (0 to 01-1, 14-)
Street Address	Employer	patton Cagamzanon					Form (Cash, Check, etc.)
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City	State	Zip Code	M	D		Y	Amount
Full Name of Contributor		·	Registr	ation Nu	ımber,	, if PA	ic _
							
Street Address	Employer/Occup	pation/Labor Organization*					Form (Cash, Check, etc.)
City	State	Zip Code	М	D	Π.	Y	Amount
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Full Name of Contributor			Registra	ation Nu	mber,	if PA	С
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Street Address	Employer/Occup	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
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City	State	Zip Code	М	D	T	Y	Amount .
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Full Name of Contributor			Registra	tion Nu	mber,	if PA	C
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City	State	Zip Code	М	D	1 1	Y	Amount
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Full Name of Contributor	!!	<u> </u>	Registra	May	-1.50	ICDA.	-
Full Name of Contributor			Kegisua	וווייו מסוזו	moci,	II PA	
	Ir 1/0		<u> </u>				
Street Address	Employer/Occup	ation/Labor Organization*				I	Form (Cash, Check, etc.)
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City	State	Zip Code	М	D	1,		Amount
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Full Name of Contributor		·	Registra	tion Nu	nber,	if PA	
				_			
Street Address	Employer/Occupa	ation/Labor Organization*					Form (Cash, Check, etc.)
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City	State	Zip Code	М	D	Y	· 1	Amount
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Page Total \$ 17,600.00

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 appear. [R.C. 3517.10(B)(4)]