Statement of Contributions Received



Prescribed by Secretary of State 03/05

		-			
Name of Committee in Full Committee to elect Vernon Morrison					
Full Name of Contributor Jane L. Jones			Registration Number, if PAC		
		*		Form (Cash, Check, etc.)	
Street Address 1988 Edgemont Rd. N.		apation/Labor Organization*		check	
City Columbus	State OH	Zip Code 43212	0 9 0 9 0 9	Amount \$75.00	
Full Name of Contributor John W. Royer			Registration Number, if P	AC	
Street Address 1480 Dublin Rd.	Employer/Occu	ipation/Labor Organization*		Form (Cash, Check, etc.)	
	State	Zip Code	M D Y	Amount	
City Columbus	OH	43215	090909	\$100.00	
Full Name of Contributor Violet Messick			Registration Number, if PAC		
Street Address 2648 Wexford rd.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43221	0 9 0 9 0 9	Amount \$25.00	
Full Name of Contributor Jennifer Morrison			Registration Number, if F	'AC	
Street Address	Employer/Occu	apation/Labor Organization*		Form (Cash, Check, etc.)	
McCoy Rd.	State	Zip Code	M D Y	on-line,pay pal	
City Columbus	OH	43220	090609	\$1.00	
Full Name of Contributor Keith Cameron			Registration Number, if F	'AC	
Street Address 2684 Nothingham Rd.		upation/Labor Organization*		Form (Cash, Check, etc.) on-line,pay pal	
2684 Nothingham Rd. City Upper Aplination	OH State	Zip Code 4324	$\begin{bmatrix} 0^{M} 9 & 0^{D} 7 & 0^{Y} 9 \end{bmatrix}$	Amount \$25.00	
Full Name of Contributor () Paul Dulac		,	Registration Number, if F	'AC	
Street Address 12490 Quivira Rd., Apt 3622	Employer/Occi	upation/Labor Organization*		Form (Cash, Check, etc.) on-line,pay pal	
City Overland Park	State KS	Zip Code 66213	0 9 0 9 0 9	Amount \$25.00	
Full Name of Contributor Lisa Horner				Registration Number, if PAC	
Street Address 1375 Kingsgate Rd.	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on-line,pay pal	
City Columbs	State OH	Zip Code 43221	0 9 1 0 0 9	Amount \$25.00	
Full Name of Contributor Phillip Harmon			Registration Number, if I		
Street Address 53/2 hongrifle Rd. City Westmille	Employer/Occi	upation/Labor Organization*	- Management op op oar man gegen zoop profession is habit day in de and in ches in ches in ches in ches in che	Form (Cash, Check, etc.) on-line,pay pal	
City 11/05fmrille	State OH	Zip Code 43081	M D Y 0 9	Amount \$100.00	

Page Total \$376.00

^{*} 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)]