



Statement of Contributions Received

Prescribed by Secretary of State 3/05

1						
Name of Committee in Full				_ 		
Citizens for Dorrian Committee Full Name of Contributor		!	To and or	tion No.	ber, if PA	ıC
		•	r cgistra	on inuiti	.oci, ii PA	
Fundraiser	Emple/O	nation/Labor Organi-ati*				Form (Cash, Check, etc.)
Street Address	Employer/Occu	ipation/Labor Organization*				torn (Casa, Check, etc.)
City	State	Zip Code	М	Ð	Y	Amount
		,	110	215	1 1	13,275.00
Full Name of Contributor	Registration Number, if PA					NC .
Street Address	Employer/Occu	ipation/Labor Organization*				Form (Cash, Cheek, etc.)
City	State	Zip Code	М	D	Y	Amount
Full Name of Contributor	Registration Number, if PA					AC
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Amount
v.,		,	<u> </u>	Į į		Į.
Full Name of Contributor	Registration Number, if Pa					AC
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor	<u> </u>	1	Registra	ation Nun	nber, if PA	ÁC .
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
ull Name of Contributor Registration Number, if Pa						AC
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor Registration Number, if P.						AC
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor Registration Number, if Pa						АС
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount .

* 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 \$ 13,275.00