Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of McGivern						
Full Name of Contributor James Joyce			Registra	ation Nu	mber, if Pa	AC .
Street Address 3770 Ridge Mill Drive	Employer/Occupate	ion/Labor Organization*	<u> </u>			Form (Cash, Check, etc.) Check
City Hilliard	State OH	Zip Code 43026	0 M 2	D 2 4	1 7	Amount \$250.00
Full Name of Contributor Contributions from Form No. 31-E						AC
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State OH	Zip Code	0 ^M 4	0 6	1 Y	Amount \$2,925.00
Full Name of Contributor	e of Contributor Registration Number, if Pa					AC
Street Address	Employer/Occupat	ion/Labor Organization*				Form (Cash, Check, etc.)
City	State OH	Zip Code	М	D	Y	Amount
Full Name of Contributor Registration Number, if P.						AC
Street Address	Employer/Occupat	ion/Labor Organization*				Form (Cash, Check, etc.)
City	State OH	Zip Code	M	D	Y	Amount
Full Name of Contributor Registration Number, if					mber, if P.	AC
Street Address	Employer/Occupat	ion/Labor Organization	·			Form (Cash, Check, etc.)
City	State OH	Zip Code	М	D	Y	Amount
Full Name of Contributor Registration Number, if P						AC
Street Address	Employer/Occupat	ion/Labor Organization*				Form (Cash, Check, etc.)
City	State OH	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 OH	Zip Code	М	D	Y	Amount
Full Name of Contributor			Registr	ation Nu	mber, if P	AC
Street Address	Employer/Occupat	tion/Labor Organization*				Form (Cash, Check, etc.)
City	State OH	Zip Code	М	D	Y	Amount

Page Total \$3,175.00

^{*} 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)]