## Statement of Contributions Received

	1	
Page	1	
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Prescribed by Secretary of State 03/05

Name of Committee in Full Committee To Re-Elect Lou Goorey						
Full Name of Contributor Barbara J McFarland			Registrati	on Nun	iber, if PA	C
Street Address 578 Evening St	Employer/Occupat	ion/Labor Organization*	L			Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085	1 M 0	D 2 5	У 0 9	Amount \$100.00
Full Name of Contributor Ralph T Compton Jr			Registration Number, if PAC			
Street Address 477 Poe Ave	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085		2 5	0 <sup>Y</sup> 9	Amount \$200.00
Full Name of Contributor Michael L Ball			Registration Number, if PA			
Street Address 925 Robbins Way		ion/Labor Organization*				Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085		2 <sup>D</sup> 5	0 9	Amount \$50.00
Full Name of Contributor Registration Number, if PAC Susan K Edison						
Street Address 2158 Castle Crest Dr	Employer/Occupat	ion/Labor Organization*				Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085	1 0 :	2 <b>5</b>	0 <sup>Y</sup> 9	Amount \$100.00
Full Name of Contributor  Joan D Ottolenghi						
Street Address 570 Hartford St	Employer/Occupat	ion/Labor Organization*				Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085	1 0	2 6	0 9	Amount \$25.00
Full Name of Contributor  Bonnie D Michael  Registration Number, if PAC						
Street Address 6681 Markwood St	Employer/Occupat	ion/Labor Organization*				Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085	1 M	D 2 5	o 9	Amount \$75.00
Full Name of Contributor Michael J Ketchum	Registra			egistration Number, if PAC		
Street Address 140 Whieldon Lane	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085	1 0	D 2 1	o 9	Amount \$50.00
Full Name of Contributor John A Cheek			Registrat	ion Nun	nber, if PA	
Street Address 810 Old Woods Rd	Employer/Occupat	ion/Labor Organization*				Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43235	м 1 0	D 2 5	0 9	Amount \$50.00

Page Total \$650.00

<sup>\*</sup> 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)]