

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full									
·									
O'Shaughnessy Committee Full Name of Contributor									
					Registration Number, if PAC				
Darrell A. Gammell Street Address									
	Епріоуе	Employer/Occupation/Labor Organization*			_	Form (Cash,	Check, etc.)		
303 Siebert St.							check		
City	Sta	ite	Zip Code	M	D	Y	Amount	·-	
Columbus	0	Н	43206	_ 016	5 0 1 9	114	ı. İ	100.00	
Full Name of Contributor					ration Nur			100.00	
IBEW PAC Voluntary Fund				1					
Street Address	Employer	/Оссир	ation/Labor Organization*				Form (Cash,	Check etc.)	
900 Seventh Street NW							check		
City	Sta	te	Zip Code	М	T D	ΤΥ	Amount		
Washington	l d l	C	20001		0 9	_		1,000.00	
Full Name of Contributor			20001		ation Nun			1,000.00	
Andrew Dunn				. Cog.Su	4410H 11H		nc.		
Street Address	Employer	Employer/Occupation/Labor Organization*					Fr. (Co.)	~	
. 266 Preston Rd.	1	Tampioyer occupation Labor Organization						Form (Cash, Check, etc.)	
City	Star		Zip Code	7	1 5		check		
Columbus		Н	1 -	M	D	Y	Amount		
Full Name of Contributor	101	-11	43209	0 6				500.00	
				Registra	ation Nun	iber, if PA	AC		
Eugene Lumpkin Street Address	[E1	<u>, </u>							
	Employer/	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
1290 Coe Dr.							check		
	Stat		Zip Code	M	D	Y	Amount		
Columbus	01	Н	43207	06				100.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	AC .		
Rhett Ricart					_				
Street Address	Employer/	Occupa	tion/Labor Organization*		-		Form (Cash, (Theck, etc.)	
34 W Poplar Ave Unit 502							check	•	
City	Stat	e	Zip Code	М	D	Y	Amount		
Columbus	01	Н	43215	016	2 3	114]	100.00	
Full Name of Contributor					tion Num		C	100.00	
United Steelworkers District 1 PCE									
Street Address	Employer/0	Employer/Occupation/Labor Organization*						heck, etc.)	
777 Dearborn Park Ln Suite I	İ						check	,	
City	State	:	Zip Code	M	D	ΙΥ	Amount		
Columbus	101	Н	43085		2]3			1,000.00	
Full Name of Contributor			10000		tion Numl			1,000.00	
Richard Borror				A C GISCIE	aon ream	ж, птл			
Street Address	Employer/C	Jeenna	tion/Labor Organization*		_		Form (Cash, C	to a trans	
3036 Leeds Road	, anpioyent	Employer/Occupation/Labor Organization*			ľ			neck, etc.)	
City	State		Zip Code	1 1/	- T		check		
Columbus		н	· ·	M	D	Y	Amount		
Full Name of Contributor	0	11	43221	0 6		1 4	_	100.00	
Registration Number, if PAC									
Street Address	Te	<u> </u>				i			
Street Address	Employer/C	Employer/Occupation/Labor Organization*			F			heck, etc.)	
50.	<u> </u>		 						
Dity	State		Zip Code	M	Ď	Y	Amount		
mired for contributions from individuals over \$100 to statuside and one	<u> </u>								

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 \$ 2,900.00