Statement of Contributions Received

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Prescribed by Secretary of State 3/05

Name of Committee in Full								
Friends of O'Connor								
Full Name of Contributor Gen Murphy			Regi	stratio	on Numb	er, if PAC		
Street Address 733 W Market St Apt 410	Employ	Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Credit Card		
City Akron	State OH	Zip Code 44303-1040	M 01	D 29	Y 16	Amount \$60.00		
Full Name of Contributor David Nassau					Registration Number, if PAC			
Street Address 105 S Roosevelt Ave	Employe	Employer/Occupation/Labor Org				Form (Cash, Check, etc.) Cash		
Citý Bexley	State OH	Zip Code 43209-1870	M 09	D 29	Y 15	Amount \$50.00		
Full Name of Contributor David Nassau	·	Registration Num						
Street Address 105 S Roosevelt Ave	Employe	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card		
City Bexley	State OH	Zip Code 43209-1870	M 01	D 07	Y 16	Amount \$25.00		
Full Name of Contributor Dan O'Connor		Registration Num						
Street Address 1637 Berkshire Rd	OPRS COO	Employer/Occupation/Labor Organization* OPRS COO				Form (Cash, Check, etc.) Check		
City Upper Arlington	State OH	Zip Code 43221-3907	M 09	D 29	Y 15	Amount \$250.00		
Full Name of Contributor Dan O'Connor	Registrat				stration Number, if PAC			
Street Address 1637 Berkshire Rd	Employ OPRS COO	Employer/Occupation/Labor Or OPRS				Form (Cash, Check, etc.) Check		
City Upper Arlington	State OH	Zip Code 43221-3907	M 01	D 07	Y 16	Amount \$250.00		
Full Name of Contributor Richele O'Connor	Registration Number, if PAC							
Street Address 1637 Berkshire Rd	Employ Retired Retired	Employer/Occupation/Labor Org Refired Retired				Form (Cash, Check, etc.) Check		
City Upper Arlington	State OH	Zip Code 43221-3907	M 01	D 28	Y 16	Amount \$5,000.00		
Full Name of Contributor OAPSE AFSCME Turnaround Ohio PAC Registration Num LA 1269						per, if PAC		
Street Address 6805 Oak Creek Dr	Employe	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43229-1501	M 01	D 26	Y 16	Amount \$1,000.00		
Full Name of Contributor People for Page	Registration Num					er, if PAC		
Street Address 1244 Erickson Rd	Employ	Employer/Occupation/Labor Organization*						
City Columbus	State OH	Zip Code 43227-2059	M	D	Y 16	Amount \$250.00		

Page Total \$6,885.00

^{*} 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 appear. [R.C. 3517.10(B)(4)]