

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for a Strong Gahanna							
Full Name of Contributor FOP Political Education Fund					Registration Number, if PAC		
Street Address 6800 Schrock Hill Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43229	M 0 4	D 2 0	Y 1 3	Amount 1,000.00	
Full Name of Contributor Michael J. Underwood					Registration Number, if PAC		
Street Address 891 Dark Star Ave		Employer/Occupation/Labor Organization* Porter Wright/ Attorney			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 0 4	D 2 4	Y 1 3	Amount 100.00	
Full Name of Contributor Porter Wright					Registration Number, if PAC		
Street Address 41 South High Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 4	D 2 4	Y 1 3	Amount 500.00	
Full Name of Contributor Orchard, Hiltz & McCliment, Inc.					Registration Number, if PAC		
Street Address 34000 Plymouth Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Livonia	State M I	Zip Code 48150	M 0 4	D 2 5	Y 1 3	Amount 1,000.00	
Full Name of Contributor					Registration Number, if PAC		
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 PAC		
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 PAC		
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 PAC		
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 \$ 2,600.00