

FILED

Ohio Campaign Finance Report

APR 11 PM 3:56

Prescribed by Secretary of State 3/05

FRANKLIN COUNTY
BOARD OF ELECTIONS
Registration Number, if PAC

Full Name of Committee Friends of John O'Grady									
Full Name of Candidate John O'Grady									
Street Address 3682 Ridgewood					Office Sought County Commissioner			District Franklin	
City Hilliard					State O H		Zip Code 43026		
Type of Report (place X to the left of report type)	Pre-Primary		X Post-Primary		Pre-General		Post-General		Annual Year
	July Monthly		August Monthly		September Monthly		Termination		Semiannual
Amended Report? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			Report Electronically filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Date of Election		M D Y 8 1 1 0 4 0 8	

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box. No other forms are required at a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$ 85,266.99
2. Total monetary contributions (From Form No. 31-A)	\$ 102,280.47
3. Total other income (From Form No. 31-A-2)	\$
4. Total funds available (sum of lines 1, 2, 3)	\$ 187,547.46
5. Total monetary expenditures (From Form No. 31-B)	\$ 166,923.82
6. Balance on hand (line 4 minus line 5)	\$ 20,623.64
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$ 170,245.59
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$
9. Outstanding loans owed by committee (From Form No. 31-C)	\$
10. Outstanding debts owed by committee (From Form No. 31-N)	\$
11. Outstanding loans owed to committee (From Form No. 31-K)	\$
12. Value of independent expenditures made (From Form No. 31-D)	\$
13. For Electronic Filing Entities only	\$
Sum of lines 2, 7 and amount of any new loans received this period	\$

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE

Ronald J. Hagan Ronald J. Hagan 4/11/08
 Print Name and Title (Treasurer and Deputy Treasurer only) Signature Date

Contribution pages _____	Expenditure pages _____	Other pages _____	Total pages <u>0</u>
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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of John O'Grady						
Full Name of Contributor General Contributions-See Spreadsheet Attached					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 1,291.04 ✓
Full Name of Contributor General Contributions-See Spreadsheet Attached					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 2,710.54 ✓
Full Name of Contributor General Contributions-See Spreadsheet Attached					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 5,308.89
Full Name of Contributor General Contributions-See Spreadsheet Attached					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 75,115.00
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 Contributions from Form 31-E (2/19 FR)					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 2,750.00
Full Name of Contributor Contributions from Form 31-E (2/25 Garner FR)					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 560.00
Full Name of Contributor Contributions from form 31-E (2/25 Fran Ryan Event)					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 1,655.00

* 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)]

FRIENDS OF JOHN UGRADY
 POST PRIMARY

1

GENERAL CONTRIBUTIONS - CLICK N PLEDGE

First Name	MI	Last Name	Billing Address 1	Billing City	Billing State/F	Billing Zip Code	Payment Method	Total Paid
Jeff		Gossman	1441 Mulford Rd	Columbus	Ohio	43212	MasterCard	\$ 20.00
George		Boas	824 Kerr Street	Columbus	Ohio	43215	VISA	\$ 100.00
Stanley		Dritz	50 W. Broad St, Ste 2200	Columbus	Ohio	43215	MasterCard	\$ 100.00
Kent		Markus	5636 Indian Hill Road	Dublin	Ohio	43017	VISA	\$ 100.00
Christine		Vineis	4920 Riverside Dr	Columbus	Ohio	43220	VISA	\$ 150.00
Sarah		Lynn	175 S. Roosevelt Ave.	Columbus	Ohio	43209	VISA	\$ 100.00
Mary		Scheil	1204 Millcreek Lane	Columbus	Ohio	43220	VISA	\$ 250.00
Peter		Wray	4374 Stinson Drive W.	Columbus	Ohio	43214	MasterCard	\$ 100.00
Bill		Faith	340 Clinton Heights Avenue	Columbus	Ohio	43202	VISA	\$ 100.00
Anne		Doyle	6472 Tonbridge St.	Worthington	Ohio	43085	MasterCard	\$ 50.00
Eddie		Pinuel	513 North Ivy Street	Arlington	Virginia	22201	VISA	\$ 50.00
Eddie		Pinuel	513 North Ivy Street	Arlington	Virginia	22201	VISA	\$ 50.00
Robert		Zimmerman	3591 Traver Rd.	Shaker Heights	Ohio	44122	VISA	\$ 65.00
Katie		Schieber	1474 Scenic Club Drive	Westerville	Ohio	43081	VISA	\$ 25.00
Kamran		Majidzadeh	4621 Edgcote Ct	New Albany	Ohio	43054	MasterCard	\$ 100.00

Credit Card Transaction Fees: \$ 68.96

Check Total Minus Fees: \$ 1,291.04

Fees Charged By:
 Click & Pledge 2200 Kraft Dr, Ste 1175 Blacksburg VA 24060

\$ 1,360.00

FRIENDS OF JOHN O'GRADY
POST PRIMARY

GENERAL CONTRIBUTIONS - CLICK N PLEDGE

2

First Name	MI	Last Name	Billing Address 1	Billing City	Billing State/F	Billing Zip Code	Payment Method	Total Paid
Melissa		Cohen	4945 Tempe Road	Powell	Ohio	43065	MasterCard	\$ 250.00
Margaret		Mentel	3860 Saturn Rd	Hilliard	Ohio	43026	VISA	\$ 50.00
Mike		McPhillips	3300 Harbor Bay Drive	Columbus	Ohio	43221	VISA	\$ 100.00
Michael		Scoliere	4603 Gwynedd Ct	Dublin	Ohio	43016	MasterCard	\$1,000.00
Thomas		O'Reilly	7570 James Close	New Albany	Ohio	43054	VISA	\$ 275.00
John		Condo	1358 Bosworth Ct.	Columbus	Ohio	43229	VISA	\$ 25.00
Jean		Harbin	1088 Wildwood Avenue	Columbus	Ohio	43219	VISA	\$ 50.00
Mitchell		Trucco	1473 Wren Lane	Powell	Ohio	43065	VISA	\$ 500.00
Michael		Sheline	912 Bernard	Columbus	Ohio	43221	VISA	\$ 100.00
Donald		McTigue	550 E. Walnut S	Columbus	Ohio	43204	VISA	\$ 250.00
Ted		Barrows	4834 Sarasota Drive	Hilliard	Ohio	43026	VISA	\$ 250.00

Total Contributions: \$2,850.00

Credit Card Transaction Fees: \$139.46

Check Total Minus Fees: \$2,710.54

Fees Charged By: Click & Pledge 2200 Kraft Dr, Ste 1175 Blacksburg VA 24060

FRIENDS OF JOHN O'GRADY
 POST PRIMARY
 GENERAL CONTRIBUTIONS - CLICK-N-PLEDGE

3

First Name	Last Name	Address 1	Address 2	City	State	Zip Code	Total Paid	Fee
Priscilla	Roberge	372 Cumberland Drive		Whitehall	Ohio	43213	\$ 50.00	\$ 2.60
Gregory	Hoffman	7652 Sawmill Road	#101	Dublin	Ohio	43016	\$ 50.00	\$ 2.60
John	Mahoney	175 S. Third St., Ste.510		Columbus	Ohio	43215	\$ 250.00	\$11.60
Scott	Doellinger	141 Northhigh Drive		Worthington	Ohio	43085	\$ 50.00	\$ 2.60
Brenda	Kenny	4814 Normandy Drive		Galena	Ohio	43021	\$ 100.00	\$ 4.85
John	Cavanaugh	3683 Preserve Crossing Blvd.		Columbus	Ohio	43230	\$ 24.00	\$ 1.43
Katie	Schieber	1474 Scenic Club Drive		Westerville	Ohio	43081	\$ 50.00	\$ 2.60
Laurie	Davis	6242 Buckeye Parkway		Grove City	Ohio	43123	\$ 50.00	\$ 2.60
Lori	Peacock	308 Oakland Park Avenue		Columbus	Ohio	43214	\$ 100.00	\$ 4.85
Dax	Blake	3214 Galway Crossing Dr.		Columbus	Ohio	43221	\$ 50.00	\$ 2.60
Catherine	Zwissler	550 N. Columbia Ave.,		Bexley	Ohio	43209	\$ 100.00	\$ 4.85
Donald	Klco	225 East North Broadway		Columbus	Ohio	43202	\$ 100.00	\$ 4.85
Daniel	Mowbray	196 S. Grant Ave., Unit 605		Columbus	Ohio	43215	\$ 250.00	\$11.60
Adam	Trautner	1208 Sanctuary Pl		Gahanna	Ohio	43230	\$ 2,000.00	\$90.35
James	Ressa	433 E. Deshler Ave		Columbus	Ohio	43206	\$ 200.00	\$ 9.35
Mo	Dioun	6965 Clivdon Mews		New Albany	Ohio	43054	\$ 2,000.00	\$90.35
Jill	Falb	3278 scioto Run Blvd		Hilliard	Ohio	43026	\$ 50.00	\$ 2.60
Julia	McGlone	123 E. Dominion Blvd		Columbus	Ohio	43214	\$ 50.00	\$ 2.60
John	Condo	1358 bosworth ct.		columbus	Ohio	43229	\$ 20.00	\$ 1.25
J.P.	Blackwood	2699 Kenny Ln		Grove City	Ohio	43123	\$ 25.00	\$ 1.48

Clickandpledge.com

To download the check statement, please follow the steps listed below:

- 1) Log into the Trio administrative payment system
- 2) Click on Account Info
- 3) Click on Reports
- 4) Click on Search Transactions
- 5) Click on Search Checks
- 6) Either select the check number from the pull-down menu, or enter the check number manually
- 7) Click on the Search Checks button to export the report

Questions?

Your administrator: Bryan Clark

Click & Pledge: 540.961.9811 / support@clickandpledge.com

42353

42353

Account #: 12712
 IssueDate : 2/15/2008
 Total Payments : \$5569.00
 Fees : \$257.61
 Other Fees : \$0.00
 Chargebacks : \$0.00
 Issuance Fee : \$2.50
 Total Check : \$5308.89

FRIENDS OF JOHN O'GRADY
POST PRIMARY GENERAL CONTRIBUTIONS 2008

Full Name Contributor	Street Address	City	ST	Zip	Date	Pay Meth	Amount
JOHN F KOZLOWSKI	7633 WORSLEY CT	DUBLIN	OH	43017	2/20/08	CHECK	\$250.00
DWIGHT SMITH	2881 SWISHER CREEK CROSSING CT	NEW ALBANY	OH	43054	2/19/08	CHECK	\$1,000.00
BLAISE BAKER ATTY	600 S HIGH ST STE 201	COLUMBUS	OH	43215	2/18/08	CHECK	\$50.00
NANCY L BRANTNER	1523 ANIKO AVE	LEWIS CENTER	OH	43035	2/19/08	CHECK	\$50.00
MARYELLEN O'SHAUGHNESSY CMTE	405 E TOWN ST	COLUMBUS	OH	43215	2/21/08	CHECK	\$1,000.00
FRIENDS FOR GINTHER	405 E TOWN ST	COLUMBUS	OH	43215	2/21/08	CHECK	\$1,000.00
FRANKLIN CO DEM PARTY	271 EAST STATE ST	COLUMBUS	OH	43215	2/21/08	CHECK	\$5,000.00
CITIZENS FOR PRISCILLA TYSON	1465 E BROAD ST	COLUMBUS	OH	43205	2/20/08	CHECK	\$2,500.00
MICHAEL D RUSSELL	5795 TARTON CIR N	DUBLIN	OH	43017	2/15/08	CHECK	\$75.00
JAMES R LINTHICUM	8760 STONERIDGE CT	PICKERINGTON	OH	43147	2/18/08	CHECK	\$75.00
GREG K STIDHAM	5182 EAGLESNEST CT	WESTERVILLE	OH	43081	2/12/08	CHECK	\$75.00
MARK T MCGATHA	2063 WESTOVER RD	COLUMBUS	OH	43221	2/11/08	CHECK	\$75.00
JAMES P SINGELTARY	6829 GLENGARRY CT	COLUMBUS	OH	43235	2/12/08	CHECK	\$75.00
JOSEPH G RIDDLE	5648 LYNX DR	WESTERVILLE	OH	43081	2/12/08	CHECK	\$75.00
WILLIAM R SCHUBERT	7412 BEVELHEIMER RD	NEW ALBANY	OH	43054	2/13/08	CHECK	\$75.00
SHERRI D MAUGER	1106 POPPY HILLS DR	BLACKLICK	OH	43004	2/12/08	CHECK	\$75.00
CHRIS WHITNEY	5859 OWL NEST DR	WEST CHESTER	OH	45069	2/13/08	CHECK	\$75.00
RONALD D DIXON	1018 PUTNEY DR	WORTHINGTON	OH	43085	2/15/08	CHECK	\$75.00
KERRY HOGAN	13539 OLD GATE DR	PICKERINGTON	OH	43147	2/15/08	CHECK	\$125.00
JAY MUEATHER	3434 HERITAGE OAKS DR	HILLIARD	OH	43026	2/20/08	CHECK	\$75.00
GREGORY A OTEY	5118 CANTERBURY DR	POWELL	OH	43065	2/21/08	CHECK	\$50.00
							\$11,850.00
DANNETTE M PALMORE	155 WEST MAIN ST STE 1704	COLUMBUS	OH	43215	2/26/08	CHECK	\$250.00
PAUL TIPPS	137 EAST STATE ST	COLUMBUS	OH	43215	2/22/08	CHECK	\$250.00
MICHAEL PERONE	383 N FRONT ST	COLUMBUS	OH	43215	2/25/08	CHECK	\$500.00
PENNY TIPPS	6641 SUNBURY RD	WESTERVILLE	OH	43082	2/25/08	CHECK	\$100.00
DON NELSON	PO BOX 1093	WESTERVILLE	OH	43086	2/26/08	CHECK	\$25.00
JOHN E SNYDER	794 S 6TH ST	COLUMBUS	OH	43206	2/23/08	CHECK	\$50.00
ELIZABETH WOODLAND	7516 BALFOURE CIRCLE	DUBLIN	OH	43017	2/20/08	CHECK	\$100.00
MELINDA GARCIA METZ	14 CAMPBELL ST	DELAWARE	OH	43015	2/20/08	CHECK	\$50.00
GERRY N BIRD	PO BOX 3274	DUBLIN	OH	43016	2/25/08	CHECK	\$1,000.00
JAMES M HOUK	600 CREEKSIDE PLAZA	GAHANNA	OH	43230	2/25/08	CHECK	\$1,000.00
GSP OHIO PAC	511 UNION ST	NASHVILLE	TN	37219	2/25/08	CHECK	\$500.00
							\$3,825.00
SHEILA DIOUN	1208 SANCTUARY PL	GAHANNA	OH	43230	2/25/08	CHECK	\$1,000.00
ADAM TRAUTNER	1208 SANCTUARY PL	GAHANNA	OH	43230	2/25/08	CHECK	\$1,000.00
RICHARD E GEERS	6022 HERITAGE VIEW CT	HILLIARD	OH	43026	2/25/08	CHECK	\$1,000.00
SONDRA A GEERS	6022 HERITAGE VIEW CT	HILLIARD	OH	43026	2/23/08	CHECK	\$1,000.00
THOMAS L FRIES	3400 TONTI DR	DUBLIN	OH	43016	2/25/08	CHECK	\$2,000.00
BENEDETTE ILOKA	6677 SPRING RUN DR	WESTERVILLE	OH	43082	2/25/08	CHECK	\$1,000.00

FRIENDS OF JOHN O'GRADY
POST PRIMARY GENERAL CONTRIBUTIONS 2008

JOHN BUSCEMI	1491 GLENN AVE	OH	43212	2/29/08	CHECK	\$150.00
KS MURCHISON	601 OLENTANGY WOODS DR	OH	43235	2/29/08	CHECK	\$50.00
G BRENT BISHOP	1475 W 3RD AVE APT 305	OH	43212	2/28/08	CHECK	\$500.00
CARL STEVEN CAMPBELL	2594 KENT RD	OH	43221	2/28/08	CHECK	\$250.00
KEVIN L BOYCE FOR COLS CITY COUNCIL CMTE	250 WEST ST STE 700	OH	43215	2/29/08	CHECK	\$500.00
COLUMBUS/CENTRAL OH BUILDING TRADES	555 E RICH ST RM 217	OH	43215	2/29/08	CHECK	\$1,000.00
						\$9,475.00
WILLIAM P DEE	698 ERSKINE RD	CT	6903	3/6/08	CHECK	\$500.00
JAMES BUNSEY	5377 RUSTIC HILLS DR WEST	OH	44256	3/12/08	CHECK	\$500.00
PAUL HICKFANG	1044 STONEY CREEK RD	OH	43235	2/21/08	CHECK	\$50.00
ROBERT PINTABONA	1668 RIDGEVIEW DR	OH	44092	3/12/08	CHECK	\$500.00
MARK EBNER/EBNER PROPERTIES	3455 EAST BROAD STREET	OH	43213	3/14/08	CHECK	\$500.00
WILLIAM MURRAY	1328 NORTHPORT DR	OH	43235	3/13/08	CHECK	\$50.00
ROBERT J BEHAL ATTY	2531 BRENTWOOD RD	OH	43209	3/12/08	CHECK	\$250.00
KRISTEN M MILLER	9323 SCOTTSDALE DR	OH	44147	3/12/08	CHECK	\$500.00
IBEW COPE	900 SEVENTH ST NW	DC	20001	3/21/08	CHECK	\$1,000.00
RORY MCGUINNESS	1239 LAKE SHORE DR #B	OH	43204	3/21/08	CHECK	\$1,000.00
RORY MCGUINNESS	1239 LAKE SHORE DR #B	OH	43204	3/21/08	CHECK	\$125.00
CRAIG D BARCLAY	3082 ELBERN AVE	OH	43209	3/13/08	CHECK	\$40.00
W SCOTT PHILLIPS	3009 BROOK HIGHLAND DR	AL	35242	3/6/08	CHECK	\$500.00
						\$5,515.00
KENNITH R DAVIS JR	1073 PUTNEY DR	OH	43085	2/22/08	CHECK	\$250.00
JAMES P OR PEGGY GARRISON	5290 LOCUST HILL LANE	OH	43017	2/27/08	CHECK	\$250.00
MARK R ROWLAND	1960 LYTHAM RD	OH	43220	2/25/08	CHECK	\$250.00
RONALD R SCHULTZ	9485 CAPE WRATH DR	OH	43017	2/21/08	CHECK	\$250.00
KATHLEEN FOLEY	215 BRIAR CLIFF RD	OH	45414	2/27/08	CHECK	\$500.00
MICHAEL P FOLEY	3525 CARRMUNN AVE	OH	44111	2/27/08	CHECK	\$500.00
OH DEMOCRATIC PARTY STATE CAMPAIGN ACCT	271 E STATE STREET	OH	43215	2/27/08	CHECK	\$5,000.00
STEPHEN E MINDZAK	7995 CORSHAM CT	OH	43016	2/26/08	CHECK	\$4,000.00
GAIL BUZBY	5119 BROWNSVILLE RD SE	OH	43055	2/26/08	CHECK	\$800.00
ERIC D CARMICHAEL	1299 BROOKWOOD PLACE	OH	43209	2/25/08	CHECK	\$250.00
TERRI ANGELO CARLSON	185 KOSSUTH ST	OH	43206	2/25/08	CHECK	\$250.00
DAVID C GOBEL	3219 W CASE RD	OH	43017	2/24/08	CHECK	\$50.00
WAYNE A TRUBIANO	2400 LOST NATION RD	OH	44049	2/28/08	CHECK	\$500.00
KIM L DISANTO	2540 MALLORY LANE	OH	44224	2/28/08	CHECK	\$500.00
SHASHIKANT P SAVLA TTEE	7753 OAKALEA CT	OH	43035	2/24/08	CHECK	\$500.00
MOODY NOLAN	300 SPRUCE ST	OH	43215	2/25/08	CHECK	\$1,000.00
JOE BRICKER	840 PRESTON AVE	OH	43221	2/25/08	CHECK	\$100.00
CHESTER WILCOX & SAXBE GOOD GOVT FUND	65 EAST STATE ST STE 1000	OH	43215	2/22/08	CHECK	\$500.00
THE RAPHAEL CO	444 SOUTH FRONT ST	OH	43215	2/21/08	CHECK	\$2,000.00
THE RAPHAEL CO	444 SOUTH FRONT ST	OH	43215	2/28/08	CHECK	\$2,000.00
SEIU DISTRICT 1199 PAC	1395 DUBLIN RD	OH	43215	2/27/08	CHECK	\$2,500.00
MARK J DENNIS	5541 MOUNTAIN SPRINGS CT	OH	43230	2/27/08	CHECK	\$50.00

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of John O'Grady						
Full Name of Contributor Contributions from Form 31-E (2/25 Latinos)					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 740.00 ✓
Full Name of Contributor Contributions from form 31-E (2/25 Mike O'Grady Event)					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 1,585.00 ✓
Full Name of Contributor Contributions from form 31-E (2/27 Parrett Event)					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 570.00 ✓
Full Name of Contributor Contributions from form 31-E (2/27 Dempsey Event)					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 1,625.00 ✓
Full Name of Contributor Contributions from Form 31-E (2/28 Moran Event)					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 1,140.00 ✓
Full Name of Contributor Contributions from Form 31-E (2/29 Raphael)					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 1,460.00 ✓
Full Name of Contributor Contributions from Form 31-E (3/2 Logan)					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 405.00 ✓
Full Name of Contributor Contributions from form 31-E (3/14 St Pats Day)					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 2,515.00 ✓

* 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)]

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of John O'Grady						
Full Name of Contributor Contributions from Form 31-E (3/25 Columbus Club)				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount 2,850.00 ✓
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
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)]

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Friends of John O'Grady									
To Whom Paid Triumph Communications						M	D	Y	Amount
						0	2	2	80,000.00
Address 1480 Dublin Rd.		Purpose TV Commercials							
City Columbus		State O	H	Zip Code 43215		Check Number Wire Transfer			
To Whom Paid John L. Frola Jr.						M	D	Y	Amount
						0	2	200.00	
Address 3197 N. Jackson Blvd.		Purpose Returned Contribution Check-Unsufficient Funds							
City Uniontown		State O	H	Zip Code 44685		Check Number 6161			
To Whom Paid Policy Works						M	D	Y	Amount
						0	2	7,500.00	
Address 155 W Main St Ste1704		Purpose Media Buy							
City Columbus		State O	H	Zip Code 43215		Check Number 2353			
To Whom Paid Triumph Communications						M	D	Y	Amount
						0	2	14,278.00	
Address 1480 Dublin Rd.		Purpose TV Commercials							
City Columbus		State O	H	Zip Code 43215		Check Number Wire Transfer			
To Whom Paid brainstorm media						M	D	Y	Amount
						0	2	5,649.21	
Address 1020 Goodale Blvd		Purpose Media/Advertisement							
City Columbus		State O	H	Zip Code 43212		Check Number 2354			
To Whom Paid iContact Corp						M	D	Y	Amount
						0	2	77.73	
Address 2635 Meridian Pkwy Ste 200		Purpose Email Communications							
City Durham		State N	C	Zip Code 27713		Check Number Debit			
To Whom Paid Café Lola						M	D	Y	Amount
						0	2	37.90	
Address		Purpose							
City Columbus		State O	H	Zip Code		Check Number Debit			
To Whom Paid PayPal-Pressflex LLC						M	D	Y	Amount
						0	2	75.00	
Address help@blogads.com		Purpose Advertisement							
City		State		Zip Code		Check Number Debit			

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full												
Friends of John O'Grady												
To Whom Paid						M	D	Y	Amount			
Cap City Direct LLC						0	3	0	6	0	8	597.35
Address			Purpose									
3242 E 11th Ave			Mail Service									
City		State	Zip Code	Check Number								
Columbus		O H	43216	2366								
To Whom Paid						M	D	Y	Amount			
Dennis Roberge						0	3	0	6	0	8	8,000.00
Address			Purpose									
372 Cumberland Dr			Consulting									
City		State	Zip Code	Check Number								
Whitehall		O H	43213	2367								
To Whom Paid						M	D	Y	Amount			
EFAR 8						0	3	0	6	0	8	3,000.00
Address			Purpose									
PO Box 10149			Consultant/Field Director									
City		State	Zip Code	Check Number								
Columbus		O H	43201	2368								
To Whom Paid						M	D	Y	Amount			
Marshall Group						0	3	0	6	0	8	2,000.00
Address			Purpose									
2432 Royal Meadow Lane			Consulting									
City		State	Zip Code	Check Number								
Grove City		O H	43123	2369								
To Whom Paid						M	D	Y	Amount			
reorganize						0	3	0	6	0	8	3,750.00
Address			Purpose									
741 Mohawk St			Consulting									
City		State	Zip Code	Check Number								
Columbus		O H	43206	2370								
To Whom Paid						M	D	Y	Amount			
Triumph Communications						0	3	0	6	0	8	4,200.00
Address			Purpose									
1480 Dublin Rd			Media Consulting									
City		State	Zip Code	Check Number								
Columbus		O H	43215	2371								
To Whom Paid						M	D	Y	Amount			
Japanese Steakhouse						0	3	0	6	0	8	186.27
Address			Purpose									
479 N High St.			Campaign Meeting									
City		State	Zip Code	Check Number								
Columbus		O H	43215	Debit								
To Whom Paid						M	D	Y	Amount			
Budget RentACar						0	3	0	7	0	8	315.13
Address			Purpose									
			Car Rental-Election Day									
City		State	Zip Code	Check Number								
Columbus		O H		Debit								

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Friends of John O'Grady												
To Whom Paid Budget RentACar						M	D	Y	Amount			
						0	3	0	7	0	8	315.54
Address				Purpose Car Rental-Election Day								
City Columbus		State O H		Zip Code		Check Number Debit						
To Whom Paid Budget RentACar						M	D	Y	Amount			
						0	3	0	7	0	8	316.06
Address				Purpose Car Rental-Election Day								
City Columbus		State O H		Zip Code		Check Number Debit						
To Whom Paid Budget RentACar						M	D	Y	Amount			
						0	3	0	7	0	8	317.26
Address				Purpose Car Rental-Election Day								
City Columbus		State O H		Zip Code		Check Number Debit						
To Whom Paid Hertz						M	D	Y	Amount			
						0	3	1	0	0	8	476.75
Address				Purpose Car Rental								
City Columbus		State O H		Zip Code		Check Number Debit						
To Whom Paid Hertz						M	D	Y	Amount			
						0	3	1	0	0	8	411.46
Address				Purpose								
City Columbus		State O H		Zip Code		Check Number Debit						
To Whom Paid Triumph Communications						M	D	Y	Amount			
						0	3	1	3	0	8	2,000.00
Address 1480 Dublin Rd				Purpose Media Consulting								
City Columbus		State O H		Zip Code 43215		Check Number 2372						
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City		State		Zip Code		Check Number						
To Whom Paid Fifth Third						M	D	Y	Amount			
						0	3	1	3	0	8	146.40
Address				Purpose Bank Service Charges								
City Columbus		State O H		Zip Code		Check Number Debit						

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Friends of John O'Grady												
To Whom Paid AT&T						M	D	Y	Amount			
						0	3	1	4	0	8	2.26
Address PO Box 6416			Purpose Mobile Phone Charges									
City Carol Stream			State I L		Zip Code 60197		Check Number 2377					
To Whom Paid brainstorm media						M	D	Y	Amount			
						0	3	1	4	0	8	2,943.10
Address 1020 Goodale Blvd			Purpose									
City Columbus			State O H		Zip Code 43212		Check Number 2378					
To Whom Paid Integrity Communication Services LLC						M	D	Y	Amount			
						0	3	1	4	0	8	78.64
Address 3333 Everson Rd West			Purpose March 4th Flyers									
City Columbus			State O H		Zip Code 43232		Check Number 2379					
To Whom Paid Outlook Media Inc						M	D	Y	Amount			
						0	3	1	4	0	8	750.00
Address 815 N High St. Ste ii			Purpose Advertisement									
City Columbus			State O H		Zip Code 43215		Check Number 2380					
To Whom Paid Tactaledge						M	D	Y	Amount			
						0	3	1	8	0	8	2,000.00
Address 929 Harrison Ave Ste305			Purpose									
City Columbus			State O H		Zip Code 43215		Check Number 2381					
To Whom Paid Jeff Coryell						M	D	Y	Amount			
						0	3	2	4	0	8	30.00
Address 3316 Claredon Rd			Purpose Advertisement									
City Cleveland Heights			State O H		Zip Code 44118		Check Number 2382					
To Whom Paid Columbus Clippers						M	D	Y	Amount			
						0	4	0	1	0	8	352.00
Address			Purpose Opening Night Campaign									
City Columbus			State O H		Zip Code		Check Number Debit					
To Whom Paid Graham Office Supplies						M	D	Y	Amount			
						0	4	0	2	0	8	9.45
Address 268 Fourth St.			Purpose Campaign Office Supplies									
City Columbus			State O H		Zip Code 43215		Check Number Debit					

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full Friends of John O'Grady												
To Whom Paid iContact Corp						M	D	Y	Amount			
						0	4	0	3	0	8	74.00
Address 2635 Meridian Pkwy ste 200				Purpose Communications-Email								
City Durham		State N C		Zip Code 27713		Check Number Debit						
To Whom Paid First Watch						M	D	Y	Amount			
						0	4	0	4	0	8	25.55
Address				Purpose								
City Columbus		State O H		Zip Code		Check Number Debit						
To Whom Paid Adjustment						M	D	Y	Amount			
									9,659.04			
Address				Purpose								
City		State		Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City		State		Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City		State		Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City		State		Zip Code		Check Number						
To Whom Paid						M	D	Y	Amount			
Address				Purpose								
City		State		Zip Code		Check Number						

FRIENDS OF JOHN O'GRADY POST PRIMARY 3/25/08 COLUMBUS CLUB FUNDRAISER

NAME	ADDRESS	CITY	ST	ZIP	TYPE	DATE	AMT
CATHLEEN P AHEARN	45504 COURTVIEW DR	CANTON	MI	48188	CHECK	3/18/08	\$1,000.00
JAY A SHARP	5915 KETCH ST	LEWIS CENTER	OH	43035	CHECK	3/20/08	\$500.00
MICHAEL H SIMONETTI	1475 STILLWATER CT	BROADVIEW HEIGHTS	OH	44147	CHECK	3/7/08	\$250.00
RONALD T ERB	428 BLANDINGS CT	WORTHINGTON	OH	43085	CHECK	3/25/08	\$100.00
JAMES F DEW	PO BOX 23075	COLUMBUS	OH	43223	CHECK	3/25/08	\$1,000.00
							\$2,850.00

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Friends of John O'Grady							
To Whom Paid P K O'Ryan				M	D	Y	Amount
				0	2	2	5
				0	8	277.32	
Address 666 N High St.		Purpose 2/25/08 Fundraiser					
City Worthington		State O	H	Zip Code 43085	Check Number debit		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State		Zip Code	Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State		Zip Code	Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State		Zip Code	Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State		Zip Code	Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State		Zip Code	Check Number		
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City		State		Zip Code	Check Number		
To Whom Paid				M	D	Y	Amount

Transfer total expenditures for this event to Form No. 31-B. Under the "To Whom Paid" state "Expenditures from Form 31-F" and list the date of the event in the date column.

Statement of Expenditures for Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Friends of John O'Grady							
To Whom Paid Byrne's Pub				M	D	Y	Amount
				0	3	1	1,429.00
Address 1248 W 3rd Ave		Purpose 3/14/08 Fundraiser					
City Columbus	State O	H	Zip Code 43212	Check Number debit			
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City	State		Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City	State		Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City	State		Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City	State		Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address		Purpose					
City	State		Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount

Transfer total expenditures for this event to Form No. 31-B. Under the "To Whom Paid" state "Expenditures from Form 31-F" and list the date of the event in the date column.

First Name	Middle Name	Last Name	Suffix	Entity	Address 1	City	State	Zip	Date of Contribution	Amount	Inkind Description
Michael		Morris			986 Elmsmere	Northville	Ml	48167	2/8/08	\$ 171.00	Catering and Event Supplies
Rita		LafForrest			1114 Slade Ave	Columbus	OH	43235	2/12/08	\$ 650.00	Catering and Event Supplies
Greg		Davies			2746 Brandon Rd	Columbus	OH	43221	2/17/08	\$ 125.00	Catering and Event Supplies
Hugh		Davies			2646 Brandon Rd	Columbus	OH	43221	2/17/08	\$ 125.00	Catering and Event Supplies
Tom		Smith			7688 Adcock Road	Westerville	OH	43082	2/17/08	\$ 50.00	Catering and Event Supplies
Betsy		O'Grady Becker			6346 Angeles Dr	Dublin	OH	43017	2/19/08	\$ 380.00	Catering and Event Supplies
Dwight		Garner			895 Beech St	Columbus	OH	43206	2/24/08	\$ 150.00	Catering and Event Supplies
Michael		O'Grady			900 Litchfield Ct	Columbus	OH	43235	2/26/08	\$ 500.00	Catering and Event Supplies
Pat		Byrne			829 Oxley Rd	Columbus	OH	43212	2/27/08	\$ 673.55	Catering and Event Space
Grace		Moran			94 Amazon Pl	Columbus	OH	43214	2/28/08	\$ 200.00	Catering and Event Supplies
				Coleman for Columbus	PO Box 1596	Columbus	OH	43216	3/4/08	\$ 2,000.00	Office Space, Telephone Services, Office Supplies
Rich		Hillis			17 S. High St, #245	Columbus	OH	43215	3/25/208	\$ 250.00	Catering and Event Space

In-Kind Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Friends of O'Grady Committee				
Full Name of Contributor Ohio Democratic Party		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address 340 East Fulton Street		Description of Item or Service Postage		M D Y Fair Market Value 0 2 2 7 0 8 1,195.85
City Columbus		State O H	Zip Code 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Full Name of Contributor Ohio Democratic Party		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address 340 East Fulton Street		Description of Item or Service Production Costs		M D Y Fair Market Value 0 2 2 6 0 8 1,171.99
City Columbus		State O H	Zip Code 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Full Name of Contributor Ohio Democratic Party		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address 340 East Fulton Street		Description of Item or Service Postage		M D Y Fair Market Value 0 2 2 6 0 8 1,748.26
City Columbus		State O H	Zip Code 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Full Name of Contributor Ohio Democratic Party		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address 340 East Fulton Street		Description of Item or Service Production Costs		M D Y Fair Market Value 0 3 0 3 0 8 3,590.16
City Columbus		State O H	Zip Code 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address		Description of Item or Service		M D Y Fair Market Value
City		State	Zip Code	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address		Description of Item or Service		M D Y Fair Market Value
City		State	Zip Code	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address		Description of Item or Service		M D Y Fair Market Value
City		State	Zip Code	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address		Description of Item or Service		M D Y Fair Market Value
City		State	Zip Code	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO

* Required for contributions from individual over \$100 to statewide and General Assembly candidates. If contributor is self-employed, occupation 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)]

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of John O'Grady									
Full Name of Contributor See Attached Spreadsheet-2/19/08 Withrow Fundraiser				Registration Number, if PAC					
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount		
							2,750.00		
City		State	Zip Code	Form(Cash,Check,etc)					
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*		M	D	Y	Amount
City				State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*		M	D	Y	Amount
City				State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*		M	D	Y	Amount
City				State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*		M	D	Y	Amount
City				State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*		M	D	Y	Amount
City				State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*		M	D	Y	Amount
City				State	Zip Code	Form(Cash,Check,etc)			

* 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)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event
2,750.00

Total expenditures this event

Page Total \$ 2,750.00

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of John O'Grady							
Full Name of Contributor See Attached Spreadsheet-2/25/08 Dwight Garner Fundraiser				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
							560.00
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			

* 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)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event
560.00

Total expenditures this event

Page Total \$ 560.00

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of John O'Grady							
Full Name of Contributor See Attached Spreadsheet-2/25/08 Fran Ryan Fundraiser				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
							1,655.00
City		State	Zip Code	Form(Cash, Check, etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash, Check, etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash, Check, etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash, Check, etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash, Check, etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash, Check, etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash, Check, etc)			

* 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)]

Fill in the boxes below only on the last page for this event.
Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event
1,655.00

Total expenditures this event
277.32

Page Total \$ 1,655.00

FRIENDS OF JOHN O'GRADY
 POST PRIMARY 2/25/08 FRAN RYAN FUNDRAISER

NAME	ADDRESS	CITY	ST	ZIP	TYPE	DATE	AMT
ANDIE M SANGALE	165 E SELBY BLVD	WORTHINGTON	OH	43085	CHECK	2/25/08	\$100
BARBARA A MACIVOR	532 CHATHAM RD	COLUMBUS	OH	43214	CHECK	2/25/08	\$50
SUSAN VIEROW	6870 HAYMORE AVE W	WORTHINGTON	OH	43085	CHECK	2/25/08	\$50
G GARY TYACK	427 PITTSFIELD DR	WORTHINGTON	OH	43085	CHECK	2/25/08	\$25
SUZANNE COUGHLIN	3914 WEDGEWOOD PL DR	POWELL	OH	43065	CHECK	2/25/08	\$25
MICHAEL ABROSO	3392 WATERSICK CT	COLUMBUS	OH	43221	CASH	2/25/08	\$30
JOHN COUGHLIN	3914 WEDGEWOOD PL DR	POWELL	OH	43065	CASH	2/25/08	\$25
JAY SCOTT	8005 CRONES CROSSING	LEWIS CENTER	OH	43035	CASH	2/25/08	\$25
DON KLCO	225 EAST NORTH BROADWAY	COLUMBUS	OH	43035	CASH	2/25/08	\$25
							<u>\$355</u>
JUDGE JOHN A CONNOR II	436 WEST FIFTH AVE	COLUMBUS	OH	43201	CHECK	2/25/08	\$50
STEVEN L BALL	1010 OLD HENDERSON RD STE 1	COLUMBUS	OH	43220	CHECK	2/11/08	\$200
DAVID L PEMBERTON SR	2626 LEWIS CENTER RD	LEWIS CENTER	OH	43035	CHECK	2/22/08	\$100
BONNIE D MICHAEL ATTY	6681 MARKWOOD ST	WORTHINGTON	OH	43085	CHECK	2/25/08	\$25
JOHN S AUDET	926 S ROOSEVELT	BEXLEY	OH	43209	CHECK	2/25/08	\$25
FRANCES ALBERTY	2281 LANE RD	COLUMBUS	OH	43220	CHECK	2/25/08	\$25
JOHN S BOWERS	720 S HIGH ST	COLUMBUS	OH	43206	CHECK	2/25/08	\$25
ARISTOTLE L HUTRAS	7348 HAYDEN RUN RD	HILLIARD	OH	43026	CHECK	2/25/08	\$25
ELLEN BAUMGARTNER	45 KENYON BROOK DR	WORTHINGTON	OH	43085	CHECK	2/25/08	\$25
PAULA V DEMING	6775 ALLOWAY ST W	WORTHINGTON	OH	43085	CHECK	2/25/08	\$25
TIMOTHY S SHEAR	201 MELBOURNE PLACE	WORTHINGTON	OH	43085	CHECK	2/25/08	\$25
MARY G SOMMER	5526 MOCCASIN DR	WESTERVILLE	OH	43081	CHECK	2/25/08	\$25
MARLENE A WIRTH	1029 NORTHFIELD PL N	REYNOLDSBURG	OH	43068	CHECK	2/25/08	\$25
WILLIAM R KEANEY	1314 OAKVIEW DR	COLUMBUS	OH	43235	CHECK	2/25/08	\$50
CATHRYN A FELLINGER	2271 EDMONTON RD	COLUMBUS	OH	43229	CHECK	2/25/08	\$25
TASHA ALLISON-HOLMES	6733 RIEBER ST	WORTHINGTON	OH	43085	CHECK	2/25/08	\$25
ELAINE F REID	64 EAST MAIN ST	WESTERVILLE	OH	43081	CHECK	2/25/08	\$25
DARRELL J KAZLOWSKI	3178 BRENTWOOD CT	POWELL	OH	43065	CHECK	2/25/08	\$25
WM G ABDELLA	4211 MARLAND DR	COLUMBUS	OH	43224	CHECK	2/25/08	\$25
RENEE VANHEYDE	761 HIGHLAND DR	COLUMBUS	OH	43214	CHECK	2/25/08	\$25
DAVID B PATTON	1466 BUCK TRAIL LN	COLUMBUS	OH	43085	CHECK	2/25/08	\$25

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of John O'Grady							
Full Name of Contributor See Attached Spreadsheet-2/25/08 Latinos Fundraiser				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
							740.00
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			

* 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)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event
740.00

Total expenditures this event

Page Total \$ 740.00

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of John O'Grady									
Full Name of Contributor See Attached Spreadsheet-2/26/08 Mike O'Grady Fundraiser				Registration Number, if PAC					
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount		
							1,585.00		
City		State	Zip Code	Form(Cash,Check,etc)					
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*		M	D	Y	Amount
City				State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*		M	D	Y	Amount
City				State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*		M	D	Y	Amount
City				State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*		M	D	Y	Amount
City				State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*		M	D	Y	Amount
City				State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*		M	D	Y	Amount
City				State	Zip Code	Form(Cash,Check,etc)			

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Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event
1,585.00

Total expenditures this event

Page Total \$ 1,585.00

FRIENDS OF JOHN O'GRADY POST PRIMARY 2/26/08 MIKE O'GRADY FUNDRAISER

NAME	ADDRESS	CITY	ST	ZIP	TYPE	DATE	AMT
MARC E MYERS	4283 LYON DR	COLUMBUS	OH	43220	CHECK	2/26/2008	\$50.00
GABRIEL VALENCIA	718 HANFORD ST	COLUMBUS	OH	43206	CHECK	2/26/2008	\$50.00
EDWIN L KIRBY	4393 COLERAIN AVE	COLUMBUS	OH	43214	CHECK	2/26/2008	\$100.00
TIMOTHY J KLUNK	5244 ROCKPORT ST	COLUMBUS	OH	43235	CHECK	2/26/2008	\$100.00
PAULA L DANIELE	1138 NANTUCKET AVE	COLUMBUS	OH	43235	CHECK	2/26/2008	\$100.00
D WESLEY NEWHOUSE	2674 HENTHORNE DR	UPPER ARLINGTON	OH	43221	CHECK	2/26/2008	\$100.00
SHARON K KEELS	1319 ROBERTS PL	COLUMBUS	OH	43207	CHECK	2/26/2008	\$100.00
MELISSA G MESSINA	2548 EDENCREEK LN	COLUMBUS	OH	43207	CHECK	2/26/2008	\$50.00
KENNETH W HOWELL II	659 JASONWAY AVE	COLUMBUS	OH	43214	CHECK	2/26/2008	\$50.00
ABBIE ARMITAGE	2732 EASTCLEFT DR	COLUMBUS	OH	43221	CHECK	2/25/2008	\$50.00
JAMES LAVER	1028 HARDESTY PLACE W	COLUMBUS	OH	43204	CHECK	2/28/2008	\$50.00
MARY JO WHEELER	518 BREVOORT RD	COLUMBUS	OH	43214	CHECK	2/21/2008	\$35.00
PATRICIA W BROWN	211 W WEISHEIMER RD	COLUMBUS	OH	43214	CHECK	2/14/2008	\$50.00
SANDRA L FOSTER	301 MARQUETTE DR	LANCASTER	OH	43130	CHECK	2/21/2008	\$50.00
CRYSTAL CANAN	332 W 1ST AVE	COLUMBUS	OH	43201	CHECK	2/19/2008	\$50.00
GEORGE R MCCUE	4598 BRIDLE PATH LANE	DUBLIN	OH	43017	CHECK	2/26/2008	\$100.00
DENNIS M MORGAN	978 LOCH NESS AVE	WORTHINGTON	OH	43085	CHECK	2/20/2008	\$100.00
CHET J CHANEY	8220 MARKHAVEN DR	COLUMBUS	OH	43235	CHECK	2/26/2008	\$250.00
ROBERT L OPPENHEIMER	811 WAKEMAN CT	WESTERVILLE	OH	43081	CHECK	2/27/2008	\$50.00
FRED LAMARR	1734 E KOSSUTH ST	COLUMBUS	OH	43206	CASH	2/26/2008	\$100.00
							\$1,585.00

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of John O'Grady							
Full Name of Contributor See Attached Spreadsheet-2/27/08 Parrett Fundraiser				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
							570.00
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			

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Fill in the boxes below only on the last page for this event.

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Total contributions this event
570.00

Total expenditures this event

Page Total \$ 570.00

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of John O'Grady							
Full Name of Contributor See Attached Spreadsheet-2/27/08 DempseyFundraiser				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
							1,625.00
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			

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Total contributions this event

1,625.00

Total expenditures this event

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Page Total \$ 1,625.00

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of John O'Grady							
Full Name of Contributor See Attached Spreadsheet-2/28/08 Moran Fundraiser				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
							1,140.00
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			
Full Name of Contributor						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City		State	Zip Code	Form(Cash,Check,etc)			

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Total contributions this event
1,140.00

Total expenditures this event

Page Total \$ 1,140.00