

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Dorrian Committee</b>									
Full Name of Contributor <b>Herbert B Asher</b>						Registration Number, if PAC			
Street Address <b>34 W Poploar Ave. Apt 501</b>			Employer/Occupation/Labor Organization* <b>Ohio State University/ Professor</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43215</b>		M <b>0   5</b>	D <b>2   7</b>	Y <b>1   3</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Zafar Sheik</b>						Registration Number, if PAC			
Street Address <b>7164 Grayson Dr</b>			Employer/Occupation/Labor Organization* <b>Doctor</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Canfield</b>		State <b>O   H</b>	Zip Code <b>44406</b>		M <b>0   6</b>	D <b>2   0</b>	Y <b>1   3</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Jegatheesan Thambaiyah</b>						Registration Number, if PAC			
Street Address <b>160 Summerset Ct</b>			Employer/Occupation/Labor Organization* <b>Star Microwave/ Accountant</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>San Ramon</b>		State <b>C   A</b>	Zip Code <b>94583</b>		M <b>0   6</b>	D <b>3   0</b>	Y <b>1   3</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Nirmal K. Sinha</b>						Registration Number, if PAC			
Street Address <b>6470 Meadowbrook Cir</b>			Employer/Occupation/Labor Organization* <b>Retired</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Worthington</b>		State <b>O   H</b>	Zip Code <b>43085</b>		M <b>0   6</b>	D <b>1   2</b>	Y <b>1   3</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>S. Das</b>						Registration Number, if PAC			
Street Address <b>4790 Vista Ridge Dr</b>			Employer/Occupation/Labor Organization* <b>Wexner Medical Center/ Doctor</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Dublin</b>		State <b>O   H</b>	Zip Code <b>43017</b>		M <b>0   6</b>	D <b>1   4</b>	Y <b>1   3</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Nandalal Yapa</b>						Registration Number, if PAC			
Street Address <b>3383 Celeste Dr</b>			Employer/Occupation/Labor Organization* <b>Barnes and Noble</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Riverside</b>		State <b>C   A</b>	Zip Code <b>92507</b>		M <b>0   7</b>	D <b>0   6</b>	Y <b>1   3</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>George R McCue</b>						Registration Number, if PAC			
Street Address <b>4598 Bridle Path Ln</b>			Employer/Occupation/Labor Organization* <b>Crabbe Brown &amp; James/ Attorney</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Dublin</b>		State <b>O   H</b>	Zip Code <b>43017</b>		M <b>0   6</b>	D <b>2   4</b>	Y <b>1   3</b>	Amount <b>750.00</b>	
Full Name of Contributor <b>Ranjan Manoranjan</b>						Registration Number, if PAC			
Street Address <b>344 Cramer Creek Ct</b>			Employer/Occupation/Labor Organization* <b>3SG/ President</b>				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Dublin</b>		State <b>O   H</b>	Zip Code <b>43017</b>		M <b>0   6</b>	D <b>2   8</b>	Y <b>1   3</b>	Amount <b>750.00</b>	

\* 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)]