

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Maryellen O'Shaughnessy Committee							
Full Name of Contributor Ohio Democratic Party					Registration Number, if PAC		
Street Address 340 E. Fulton Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43215	M 1 0	D 2 0	Y 0 8	Amount 1,500.00	
Full Name of Contributor Abigail Wexner					Registration Number, if PAC		
Street Address 1 Whitebarn		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City New Albany	State O H	Zip Code 43054	M 1 0	D 2 0	Y 0 8	Amount 1,000.00	
Full Name of Contributor Civil Engineers for a Civil Government					Registration Number, if PAC OH 1356		
Street Address 12855 Wheaton Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Pickerington	State o H	Zip Code 43137	M 1 0	D 2 0	Y 0 8	Amount 500.00	
Full Name of Contributor Columbus Franklin County AFL CIO PCE					Registration Number, if PAC		
Street Address 1545 Alum Creek Dr. 2nd Floor		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43209	M 1 0	D 2 0	Y 0 8	Amount 350.00	
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)]