

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full COMMITTEE TO ELECT JAMES MCGREGOR							
Full Name of Contributor Dilipe K. and Joyce E. Ranade					Registration Number, if PAC		
Street Address 626 Laurel Ridge Court		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 1 1	D 2 1	Y 0 3	Amount 50.00	
Full Name of Contributor J. David Schroeder					Registration Number, if PAC		
Street Address 122 Nob Hill Drive North		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 1 1	D 2 1	Y 0 3	Amount 50.00	
Full Name of Contributor James and Sandra Swartzmiller					Registration Number, if PAC		
Street Address 6868 Bowerman Street, West		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Worthington	State O H	Zip Code 43085	M 1 1	D 2 1	Y 0 3	Amount 50.00	
Full Name of Contributor Todd R. Emoff					Registration Number, if PAC		
Street Address 1123 Sleeping Meadow Drive		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054-9556	M 1 1	D 2 1	Y 0 3	Amount 100.00	
Full Name of Contributor Patricia S. and Robert E. Froman					Registration Number, if PAC		
Street Address 325 Dellfield Way		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 1 1	D 2 1	Y 0 3	Amount 150.00	
Full Name of Contributor Ray J. King					Registration Number, if PAC		
Street Address 107 W. Johnstown Road		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230-3240	M 1 1	D 2 1	Y 0 3	Amount 150.00	
Full Name of Contributor Roland and Edith Hall					Registration Number, if PAC		
Street Address 83 Nob Hill Drive N.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 1 1	D 2 1	Y 0 3	Amount 50.00	
Full Name of Contributor Thomas Weber					Registration Number, if PAC		
Street Address 504 A Havens Corner road		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 1 1	D 2 1	Y 0 3	Amount 25.00	

* Required for contributions 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 appear. R.C. 3517.10(B)(4)