

Statement of Contributions Received

Prescribed by Secretary of State 8/95

Name of Committee in Full						
Citizens Committee for Persons with M.R.						
Full Name of Contributor Living in Family Environments					Registration Number, if PAC	
Street Address 142 N. High St.			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Cohasset			State OH	Zip Code	M 0	D 2
					Y 0	8
					Amount \$1000.	
Full Name of Contributor Schorr Architects						
Street Address 230 Bradenton					Registration Number, if PAC	
Street Address 230 Bradenton			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Dublin			State OH	Zip Code 43017	M 0	D 2
					Y 0	8
					Amount \$200.	
Full Name of Contributor A. D. D.						
Street Address 1392 Dubhri Rd.					Registration Number, if PAC	
Street Address 1392 Dubhri Rd.			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Cohasset			State OH	Zip Code 43215	M 0	D 2
					Y 0	8
					Amount \$5000.	
Full Name of Contributor D. S. A. C. O.						
Street Address 2879 Johnston Rd.					Registration Number, if PAC	
Street Address 2879 Johnston Rd.			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Cohasset			State OH	Zip Code 43219	M 0	D 2
					Y 0	8
					Amount \$500.	
Full Name of Contributor Dorothy Renner						
Street Address 5558 Roche Dr.					Registration Number, if PAC	
Street Address 5558 Roche Dr.			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Cohasset			State OH	Zip Code 43229	M 0	D 2
					Y 0	8
					Amount \$50.	
Full Name of Contributor Chris Poptik						
Street Address 1018 Oak St. # A					Registration Number, if PAC	
Street Address 1018 Oak St. # A			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus			State OH	Zip Code 43205	M 0	D 2
					Y 0	8
					Amount 20.00	
Full Name of Contributor R. J. Woodward						
Street Address 431 Cardinal Hill Lane					Registration Number, if PAC	
Street Address 431 Cardinal Hill Lane			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Powell			State OH	Zip Code 43065	M 0	D 2
					Y 0	8
					Amount \$500.	

*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 donate 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)