

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Roseann Hicks									
Full Name of Contributor Ralph Palermini							Registration Number, if PAC		
Street Address 1735 Creek Rd.				Employer/Occupation/Labor Organization* G&M Plumbing				Form (Cash, Check, etc.) Cash	
City Sunbury		State OH		Zip Code 43074		M D Y 0 6 1 8 0 9		Amount \$25.00	
Full Name of Contributor Christopher Palermini							Registration Number, if PAC		
Street Address 862 Mill Run Dr.				Employer/Occupation/Labor Organization* G&M Plumbing				Form (Cash, Check, etc.) Cash	
City Sunbury		State OH		Zip Code 43074		M D Y 0 6 1 8 0 9		Amount \$25.00	
Full Name of Contributor Ramona L. Whisler							Registration Number, if PAC		
Street Address 2470 Berwick Blvd.				Employer/Occupation/Labor Organization* Retired				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43209		M D Y 0 6 1 9 0 9		Amount \$50.00	
Full Name of Contributor Marvin Foster							Registration Number, if PAC		
Street Address 62 Fenway Rd.				Employer/Occupation/Labor Organization* Bo Can Do It				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43214		M D Y 0 6 2 0 0 9		Amount \$50.00	
Full Name of Contributor Ray Stutler							Registration Number, if PAC		
Street Address 1982 Oak Point Cir.				Employer/Occupation/Labor Organization* Retired				Form (Cash, Check, etc.) Cash	
City Columbus		State OH		Zip Code 43229		M D Y 0 6 2 3 0 9		Amount \$20.00	
Full Name of Contributor Franklin County Forum							Registration Number, if PAC		
Street Address 425 Hiler Rd.				Employer/Occupation/Labor Organization* Speaking Event				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43228		M D Y 0 6 2 6 0 9		Amount \$25.00	
Full Name of Contributor Kelly Landusky							Registration Number, if PAC		
Street Address 4155 Marland Dr. S.				Employer/Occupation/Labor Organization* The Ocean Club				Form (Cash, Check, etc.) Cash	
City Columbus		State OH		Zip Code 43224		M D Y 0 7 0 1 0 9		Amount \$20.00	
Full Name of Contributor Keith D. Taylor							Registration Number, if PAC		
Street Address 1989 Minnesota Ave.				Employer/Occupation/Labor Organization* OSU				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43211		M D Y 0 7 0 6 0 9		Amount \$50.00	

* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$265.00**