

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Beryl Piccolantonio							
Full Name of Contributor Stonewall Democrats of Central Ohio					Registration Number, if PAC		
Street Address 545 E. Town St.		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43215	M 1 0	D 1 9	Y 1 5	Amount 100.00	
Full Name of Contributor Gahanna Jefferson Fund for Children in Public Education					Registration Number, if PAC		
Street Address 160 S. Hamilton Rd.		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 1 0	D 2 7	Y 1 5	Amount 2,000.00	
Full Name of Contributor Citizens for Bishoff					Registration Number, if PAC		
Street Address 545 E. Town St.		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43215	M 1 0	D 2 6	Y 1 5	Amount 150.00	
Full Name of Contributor Robert Renner					Registration Number, if PAC		
Street Address 375 Woodmark Run		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 1 1	D 0 2	Y 1 5	Amount 25.00	
Full Name of Contributor David Palguta					Registration Number, if PAC		
Street Address 2687 Northmont Dr.		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43004	M 1 1	D 0 2	Y 1 5	Amount 25.00	
Full Name of Contributor Todd Kleismet					Registration Number, if PAC		
Street Address 101 Brevoort Rd.		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) paypal	
City Columbus	State O H	Zip Code 43214	M 1 0	D 1 9	Y 1 5	Amount 50.00	
Full Name of Contributor Michael Dorsch					Registration Number, if PAC		
Street Address 5018B Pine Creek Dr.		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) paypal	
City Westerville	State O H	Zip Code 43081	M 1 0	D 1 9	Y 1 5	Amount 200.00	
Full Name of Contributor Merisa Bowers					Registration Number, if PAC		
Street Address 363 Higley Ct.		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) paypal	
City Gahanna	State O H	Zip Code 43230	M 1 0	D 2 3	Y 1 5	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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 2,600.00