

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Beryl Piccolantonio</b>							
Full Name of Contributor <b>Brian Miller</b>					Registration Number, if PAC		
Street Address <b>8019 Bowfin Rd.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>paypal</b>		
City <b>Blacklick</b>	State <b>O   H</b>	Zip Code <b>43004</b>	M <b>0   9</b>	D <b>1   7</b>	Y <b>1   5</b>	Amount <b>25.00</b>	
Full Name of Contributor <b>Michael Amer</b>					Registration Number, if PAC		
Street Address <b>1302 Totten Dr.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>paypal</b>		
City <b>New Albany</b>	State <b>O   H</b>	Zip Code <b>43054</b>	M <b>0   9</b>	D <b>2   0</b>	Y <b>1   5</b>	Amount <b>30.00</b>	
Full Name of Contributor <b>Sophia Pesis</b>					Registration Number, if PAC		
Street Address <b>789 Caroway Blvd.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Gahanna</b>	State <b>O   H</b>	Zip Code <b>43230</b>	M <b>0   9</b>	D <b>1   2</b>	Y <b>1   5</b>	Amount <b>25.00</b>	
Full Name of Contributor <b>Evan Brown</b>					Registration Number, if PAC		
Street Address <b>15740 Gamekeepers Trail</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>paypal</b>		
City <b>Novelty</b>	State <b>O   H</b>	Zip Code <b>44072</b>	M <b>0   9</b>	D <b>2   9</b>	Y <b>1   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Contributions from form No. 31E</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State <b> </b>	Zip Code	M <b>0   7</b>	D <b>2   2</b>	Y <b>1   5</b>	Amount <b>195.00</b> <b>AWP</b> <del>1,915.00</del>	
Full Name of Contributor <b>Robert Dean</b>					Registration Number, if PAC		
Street Address <b>449 Albany Ct.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>paypal</b>		
City <b>Gahanna</b>	State <b>O   H</b>	Zip Code <b>43230</b>	M <b>1   0</b>	D <b>0   8</b>	Y <b>1   5</b>	Amount <b>25.00</b>	
Full Name of Contributor <b>Molly Selan</b>					Registration Number, if PAC		
Street Address <b>1310 Pond Hollow Dr.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>paypal</b>		
City <b>New Albany</b>	State <b>O   H</b>	Zip Code <b>43054</b>	M <b>1   0</b>	D <b>0   5</b>	Y <b>1   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>OAPSE AFSCME Turnaround Ohio PAC</b>					Registration Number, if PAC <b>1269</b>		
Street Address <b>6805 Oak Creek Dr.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43229</b>	M <b>0   9</b>	D <b>2   9</b>	Y <b>1   5</b>	Amount <b>250.00</b>	

\* 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 \$ **2,470.00** **AWP**