

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens Committee for Persons with D.D.						
Full Name of Contributor Michael A Boyce				Registration Number, if PAC		
Street Address P.O. Box 541		Employer/Occupation/Labor Organization N/A		Form (Cash, Check, etc.) check		
City Ashley	State O H	Zip Code 43003	M 0	D 4	Y 1 1 1 1	Amount 22.00
Full Name of Contributor S. L. Yates				Registration Number, if PAC		
Street Address P. O. Box 9534		Employer/Occupation/Labor Organization N/A		Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43209	M 0	D 4	Y 0 6 1 1	Amount 22.00
Full Name of Contributor Marilyn F. Gabel				Registration Number, if PAC		
Street Address 72 Spring Creek Drive		Employer/Occupation/Labor Organization N/A		Form (Cash, Check, etc.) check		
City Westerville	State O H	Zip Code 43081	M 0	D 4	Y 0 6 1 1	Amount 22.00
Full Name of Contributor Joan M. Thorton				Registration Number, if PAC		
Street Address 326 Northbridge Rd		Employer/Occupation/Labor Organization N/A		Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43214	M 0	D 4	Y 1 1 1 1	Amount 12.00
Full Name of Contributor Trena L. Brown				Registration Number, if PAC		
Street Address 10545 Amish Ridge Road		Employer/Occupation/Labor Organization N/A		Form (Cash, Check, etc.) check		
City Somerset	State O H	Zip Code 43783	M 0	D 3	Y 3 1 1 1	Amount 33.00
Full Name of Contributor Karen F. Smathers				Registration Number, if PAC		
Street Address 8332 Honda Hills Rd		Employer/Occupation/Labor Organization N/A		Form (Cash, Check, etc.) check		
City Thoraville	State O H	Zip Code 43076	M 0	D 4	Y 0 7 1 1	Amount 33.00
Full Name of Contributor Theresa L Cohagan				Registration Number, if PAC		
Street Address 197 W Brighton Rd		Employer/Occupation/Labor Organization N/A		Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43202	M 0	D 3	Y 3 1 1 1	Amount 81.00
Full Name of Contributor Beth Espinoza				Registration Number, if PAC		
Street Address 3622 Washburn St		Employer/Occupation/Labor Organization N/A		Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43213	M 0	D 4	Y 0 3 1 1	Amount 44.00

* 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 without 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 \$ **269.00**