

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Yassenoff							
Full Name of Contributor Roland D. Killian						Registration Number, if PAC	
Street Address 5090 Squirrel Bend			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Upper Arlington	State O H	Zip Code 43220	M 0 1	D 2 1	Y 1 0	Amount 25.00	
Full Name of Contributor Troy C. Judy						Registration Number, if PAC	
Street Address 1790 Quarry View			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43204	M 0 4	D 2 3	Y 1 0	Amount 250.00	
Full Name of Contributor Chad Michael Hawley						Registration Number, if PAC	
Street Address 1653 Merganser Run Dr.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43215	M 0 4	D 2 7	Y 1 0	Amount 100.00	
Full Name of Contributor Contributions from Form 31-e						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
			0 5	0 7	1 0	1,540.00	
Full Name of Contributor Wiles, Boyle, Burkholder, Bringardner Co. LPA PAC						Registration Number, if PAC CP-1058	
Street Address 300 Spruce St.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43215	M 0 5	D 1 3	Y 1 0	Amount 50.00	
Full Name of Contributor Rafeld For State Representative						Registration Number, if PAC	
Street Address 865 Macon Alley			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43206	M 0 7	D 1 8	Y 1 0	Amount 200.00	
Full Name of Contributor Amy Kerschner						Registration Number, if PAC	
Street Address 510 Hedgegate Ct.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Tiffin	State O H	Zip Code 44883	M 0 8	D 1 0	Y 1 0	Amount 50.00	
Full Name of Contributor Committee for Wade Steen						Registration Number, if PAC	
Street Address 2500 Sherwin Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Upper Arlington	State O H	Zip Code 43221	M 1 2	D 2 4	Y 1 0	Amount 250.00	

* 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 \$ 2,465.00