## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full				
Citizens for Frank Ciotola Registration Number, if PAC				C
Full Name of Contributor			regionation Number, it FA	~
Fugene C. D'Angelo, Jr	Employer/Occupation	n/Labor Organization *		Form (Cash, Check, etc.)
2451 Brixton Rd.	Lampio, on Occupant			Check
City		Zip Code	M D Y	Amount
Columbus	OH	43221	de mentaminakan kentan karan karan bandarah mencan berandarah berandarah berandarah berandarah berandarah bera	\$ 100.00
Full Name of Contributor				
Jodi A. Stechschulte	T	# 1 · O · · · · · · · · · · · · · · · · ·		Form (Cash, Check, etc.)
Street Address	Employer/Occupation/Labor Organization *			
1200 Brittany Lane	State	Zip Code	M D Y	Check Amount
•	OH	43220	091309	\$50.00
Columbus Full Name of Contributor		<u>manina maka tanda dan ari fanada da arran sa ta ta mana arran ta tanda ari ta ta</u>	Registration Number, if PA	C'
Janet Snyder Knab Street Address				Ross (Cash Class)
Street Address	Employer/Occupation	on/Labor Organization *		Form (Cash, Check, etc.)
1120 Regency Drive	State	Zip Code	M D Y	Check Amount
*	OH	43220	1 1 1 1 1 1	\$100.00
Upper Arlington Full Name of Contributor	W F F	4)	Registration Number, if PA	
Robert S. Long Street Address	Employer/Occupation	on/Labor Organization *		Form (Cash, Check, etc.)
2064 Waltham Road				Check
City	1 '	Zip Code	M D Y	Amount
Upper Arlington   Full Name of Contributor	OH	43221	Registration Number, if PA	\$100.00
Michael J. Gorman Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.)				
Street Address	employer/Occupation	DIVERSOR OF BRIDE		
360 Fdgington	Stake	Zip Code	M D Y	Check Amount
	OH	43064	091109	\$50,00
Plain City Full Name of Contributor	and the second s		Registration Number, if P	AC .
Christine F. Larsen				
Street Address	Employer/Occupation	on/Labor Organization *		Form (Cash, Check, etc.)
1360 Norwell Dr.	Gt-1	Zip Code	IM N N	Check Amount
City Columbus	State OH	43220	0 9 2 3 0 9	\$50.00
COLUMDUS Full Name of Contributor	<u> </u>	1 7/44	Registration Number, if Pa	
David M. Drees				
Street Address	Employer/Occupation	on/Labor Organization *		Form (Cash, Check, etc.)
3781 Criswell Drive				Check
City	State	Zip Code	M D Y	Amount
Columbus	OH	43220-4934	0 9 2 3 0 9	A CONTRACTOR OF THE PARTY OF TH
Full Name of Contributor Registration Number, if PAC				
Robin J. Hall	[P. 1. 10	on/Labor Organization *		Form (Cash, Check, etc.)
Street Address	Employer/Occupati	on/Lagor Organization		Check
4141 Randmore Ct.	State	Zip Code	M D Y	Amount
ciy Columbus	OH	43220	092309	\$50.00
MT0HD02	1	70440	1717171717	1 15 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5

Page Total \$ 600.00

<sup>\*</sup> 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)]