31-A
R.C. 3517.10

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee - Full								
Citizens Committee for Persons with D.D.								
Full Name of Contributor							Registration Number, if PAC	
D. F. Johnson								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
3014 Elspeth Ct	N/A						check	
City	State	Zip Code	M	D	Y		Amount	
Columbus	O H	43231	0 1	2 7	1 1		25.00	
Full Name of Contributor							Registration Number, if PAC	
Misty Brown								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
1950 Merganser Run Rd	N/A						check	
City	State	Zip Code	M	D	Y		Amount	
Columbus	O H	43215	0 1	2 7	1 1		25.00	
Full Name of Contributor							Registration Number, if PAC	
Catherine A. Derose								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
4 Ashton Drive	N/A						check	
City	State	Zip Code	M	D	Y		Amount	
Ashville	O H	43103	0 1	2 7	1 1		25.00	
Full Name of Contributor							Registration Number, if PAC	
Sharomon I. Rogers								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
2332 Weyburn Rd.	N/A						check	
City	State	Zip Code	M	D	Y		Amount	
Columbus	O H	43232	0 1	2 7	1 1		25.00	
Full Name of Contributor							Registration Number, if PAC	
Nan J. Burns								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
235 Overbrook Drive	N/A						check	
City	State	Zip Code	M	D	Y		Amount	
Columbus	O H	43214	0 1	2 7	1 1		25.00	
Full Name of Contributor							Registration Number, if PAC	
Linda M. Richards								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
1349 Doten Ave	N/A						check	
City	State	Zip Code	M	D	Y		Amount	
Columbus	O H	43212	0 1	2 7	1 1		25.00	
Full Name of Contributor							Registration Number, if PAC	
Debra Sherman								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
3055 Columbus Rd.	N/A						check	
City	State	Zip Code	M	D	Y		Amount	
Centerburg	O H	43011	0 1	2 7	1 1		25.00	
Full Name of Contributor							Registration Number, if PAC	
Dorcas M. Sharp								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
146 S James Rd	N/A						check	
City	State	Zip Code	M	D	Y		Amount	
Columbus	O H	43213	0 1	2 7	1 1		25.00	

* 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 $ 200.00