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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full									
Citizens for David DeCapua									
Full Name of Contributor				Registration Number, if PAC					
Michael Kenney									
Street Address	Employer	/Оссира	ntion/Labor Organization*				Form (Cash, Ch	eck, etc.)	
250 Daniel Burnham Sq							check		
City	Sta	te	Zip Code	М	D	Υ	Amount		
Columbus	01	н	43215	0 8	0 3	1 3		250.00	
Full Name of Contributor	<u></u> -				tion Num		vc		
Jaymie Kenney									
Street Address	Employe	/Оссира	ation/Labor Organization*				Form (Cash, Ch	eck, etc.)	
250 Daniel Burnham Sq	' '	·	v				check		
City	Sta	te	Zip Code	М	D	Υ	Amount		
Columbus	0 1	Н	43215	0 8	0 3	1 3		250.00	
Full Name of Contributor	1 0 1	11	40210		tion Num	· ·	VC	250.00	
Nicholas King			•			,			
Street Address	Itantow	/Ocampo	ation/Labor Organization*				Form (Cash, Ch	eck etc.)	
	Employer	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
2730 Abington Rd	Sta		7:- C- 4-	M	D	Y	check		
· ·			Zip Code			1	Amount	250.00	
Columbus	0	Н	43221	0 8	0 3	1 3		250.00	
Full Name of Contributor				Kegistra	tion Num	ber, if PA	AC .		
Jennifer King									
Street Address	Employer	:/Occupa	ation/Labor Organization*				Form (Cash, Ch	eck, etc.)	
2730 Abington Rd							check		
City	Sta	te	Zip Code	М	D ,	Y	Amount		
Columbus	0	Н	43221	0 8	0 3	1 3		250.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	AC .		
Andrew Bainbridge									
Street Address	Employe	/Occupa	ation/Labor Organization*				Form (Cash, Ch	eck, etc.)	
2628 Dorset Rd							check		
City	Sta	te	Zip Code	М	D	Y	Amount		
Columbus	0	Н	43221	0 8	0 3	1 3		250.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	AC .		
Kathleen Bainbridge									
Street Address	Employe	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
2628 Dorset Rd							check		
City	Sta	ite	Zip Code	М	D	Y	Amount		
Columbus	01	Н	43221	0 8	0 3	1 3		250.00	
Full Name of Contributor	1 - 1				tion Num		AC		
Cameron Mitchell				1					
Street Address	Employe	/Occup	ation/Labor Organization*	Ь—			Form (Cash, Ch	eck etc.)	
2000 Tremont Rd	E. E. Francisco	Соссира	anon unon organization				check	,	
City	Stz	ile	Zip Code	Тм	D	Y	Amount		
Columbus	آها	Н	43212		0 3	1 3		250.00	
Full Name of Contributor	0	11	43212		tion Num		)Ċ	230.00	
				Regisua	tion Itali	oct, 11 t z			
Brenda Schafer	le		all all a Committee of				Form (Corb. Ct	aali ata l	
Street Address	Employe	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
203D Edinburgh Dr			lav. o. t	T		<del></del>	check		
City	Str		Zip Code	M	D	Y	Amount	000.00	
Cary	N	C	27511	[0]8	0 3	1 3		200.00	

Page Total \$	1,950.00

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)]