

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Gawronski							
Full Name of Contributor Friends of Donna O'Connor						Registration Number, if PAC	
Street Address 5065 Winchell CT			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43017	M 0	D 8	Y 2	Amount 100.00	
Full Name of Contributor Randolph A. Roth						Registration Number, if PAC	
Street Address Grandee Cliffs DR			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43016	M 0	D 9	Y 2	Amount 50.00	
Full Name of Contributor Jeanne L Horvath						Registration Number, if PAC	
Street Address 2431 Channibg RD			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City University Heights	State OH	Zip Code 44118	M 0	D 9	Y 3	Amount 150.00	
Full Name of Contributor Ermagene D. Kelly						Registration Number, if PAC	
Street Address 7814 Wicklow CT			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 0	Amount 50.00	
Full Name of Contributor Sharon R Buehrer						Registration Number, if PAC	
Street Address 1425 Wynwood LN			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Williamsport	State P A	Zip Code 17701	M 1	D 0	Y 0	Amount 75.00	
Full Name of Contributor Cynthia Hoffman						Registration Number, if PAC	
Street Address 88 West Kossuth ST			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	M 1	D 0	Y 0	Amount 50.00	
Full Name of Contributor Timothy Coss						Registration Number, if PAC	
Street Address 7665 W Kestrel Way			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 0	Amount 25.00	
Full Name of Contributor Frances Merrell						Registration Number, if PAC	
Street Address 8742 Craigston CT			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 0	Amount 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 \$ 525.00