

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Yassenoff							
Full Name of Contributor Charlie Mueller						Registration Number, if PAC	
Street Address 2523 Onandaga Drive			Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check	
City Upper Arlington			State O H	Zip Code 43221	M 0 6	D 1 6	Y 1 1
Amount 100.00							
Full Name of Contributor Richard Hillis						Registration Number, if PAC	
Street Address 17 South High Street, Suite 245			Employer/Occupation/Labor Organization* Governmental Policy Group			Form (Cash, Check, etc.) Check	
City Columbus			State O H	Zip Code 43215	M 0 6	D 1 6	Y 1 1
Amount 100.00							
Full Name of Contributor Skip Weiler						Registration Number, if PAC	
Street Address 41 South High Street, Suite 1010			Employer/Occupation/Labor Organization* Real Estate			Form (Cash, Check, etc.) Check	
City Columbus			State O H	Zip Code 43215	M 0 6	D 1 6	Y 1 1
Amount 250.00							
Full Name of Contributor Estelle Scott						Registration Number, if PAC	
Street Address 1553 Fishinger Road			Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check	
City Upper Arlington			State O H	Zip Code 43221	M 0 9	D 0 5	Y 1 1
Amount 50.00							
Full Name of Contributor Linda Mauger						Registration Number, if PAC	
Street Address 2043 North Devon Road			Employer/Occupation/Labor Organization* The Ohio State University			Form (Cash, Check, etc.) Check	
City Upper Arlington			State O H	Zip Code 43212	M 0 9	D 0 3	Y 1 1
Amount 50.00							
Full Name of Contributor Vasyl Rabosvuk						Registration Number, if PAC	
Street Address 285 Warner Road			Employer/Occupation/Labor Organization* Van Meter Ashbrook			Form (Cash, Check, etc.) Check	
City Hinckleu			State O H	Zip Code 44233	M 0 9	D 0 3	Y 1 1
Amount 35.00							
Full Name of Contributor Sandra Miller						Registration Number, if PAC	
Street Address 3425 Sunningdale Way			Employer/Occupation/Labor Organization* Remax			Form (Cash, Check, etc.) Check	
City Upper Arlington			State O H	Zip Code 43221	M 0 9	D 0 4	Y 1 1
Amount 100.00							
Full Name of Contributor Charlie Solley						Registration Number, if PAC	
Street Address 7199 Wendy Trail Lane			Employer/Occupation/Labor Organization* Best Effort			Form (Cash, Check, etc.) Check	
City Dublin			State O H	Zip Code 43017	M 0 9	D 0 5	Y 1 1
Amount 35.00							

* 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 \$ 720.00