

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Beryl Piccolantonio							
Full Name of Contributor Friends of Marilyn Brown					Registration Number, if PAC		
Street Address 545 E. Walnut St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43215	M 0 3	D 0 1	Y 1 3	Amount 500.00	
Full Name of Contributor Michael W. Ward					Registration Number, if PAC		
Street Address 441 McCutcheon Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) paypal		
City Gahanna	State O H	Zip Code 43230	M 0 3	D 1 4	Y 1 3	Amount 100.00	
Full Name of Contributor Max Brown					Registration Number, if PAC		
Street Address 475 H Street, NW, Unit 2		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) paypal		
City Washington DC	State I	Zip Code 20001	M 0 3	D 1 7	Y 1 3	Amount 100.00	
Full Name of Contributor Nita Brown					Registration Number, if PAC		
Street Address 25822 Fairmount Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Beachwood	State O H	Zip Code 44122	M 0 3	D 2 8	Y 1 3	Amount 200.00	
Full Name of Contributor Michael Brown					Registration Number, if PAC		
Street Address 23240 Chagrin Blvd. #410		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Cleveland	State O H	Zip Code 44122	M 0 4	D 0 2	Y 1 3	Amount 75.00	
Full Name of Contributor Michelle Brown					Registration Number, if PAC		
Street Address 15740 Gamekeepers Trl.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Novelty	State O H	Zip Code 44072	M 0 4	D 1 0	Y 1 3	Amount 200.00	
Full Name of Contributor Beatrice Epstein					Registration Number, if PAC		
Street Address 5420 Huron Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Lyndhurst	State O H	Zip Code 44124	M 0 4	D 1 7	Y 1 3	Amount 150.00	
Full Name of Contributor Jon Hackathorn					Registration Number, if PAC		
Street Address 2490 Middlesex Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43220	M 0 4	D 1 7	Y 1 3	Amount 75.00	

* 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 \$ 1,400.00