31-A
R.C. 3517.10

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Citizens Committee for Persons with D.D.							
Full Name of Contributor						Registration Number, if PAC	
Arc Industries, Inc.							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
2879 Johnstown Road	N/A					check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43219	09	12	10	2,083.78	
Full Name of Contributor						Registration Number, if PAC	
Living Skills Center							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
4200 Bixby Road	N/A					check	
City	State	Zip Code	M	D	Y	Amount	
Groveport	OH	43125	09	17	10	1,000.00	
Full Name of Contributor						Registration Number, if PAC	
Lee Childs							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
104 Williard Dr.	N/A					check	
City	State	Zip Code	M	D	Y	Amount	
Pickerington	OH	43147	08	19	10	25.00	
Full Name of Contributor						Registration Number, if PAC	
Carrie A. McDonald							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
2591 Petzinger Rd., Apt K.	N/A					check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43209	09	13	10	25.00	
Full Name of Contributor						Registration Number, if PAC	
Christine A. Reese							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
4989 Blendon Pond Dr.	N/A					check	
City	State	Zip Code	M	D	Y	Amount	
Westerville	OH	43081	08	17	10	25.00	
Full Name of Contributor						Registration Number, if PAC	
Donald R. Kantor							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
204 Malloy Ln.	N/A					check	
City	State	Zip Code	M	D	Y	Amount	
Delaware	OH	43015	08	23	10	25.00	
Full Name of Contributor						Registration Number, if PAC	
Claudia M. Ross							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
1261 Dunham Rd	N/A					check	
City	State	Zip Code	M	D	Y	Amount	
Delaware	OH	43015	08	18	10	25.00	
Full Name of Contributor						Registration Number, if PAC	
Benjamin L. Burke							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
1290 Primrose Pl.	N/A					check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43212	09	13	10	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 $ 3,233.78