31-A
R.C. 3517.10

Page 14

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 of PAC								Form (Cash, Check, etc.)
Kristi Laslo									
Street Address	Employer/Occupation/Labor Organization*								Form (Cash, Check, etc.)
468 McPherson Dr	N/A								check
City	State	Zip Code	M		D		Y		Amount
Blacklick	O H	43004	0	4	1	1	1	1	44.00
Full Name of Contributor	Registration Number of PAC								
Wendy J. Mattucci									
Street Address	Employer/Occupation/Labor Organization*								Form (Cash, Check, etc.)
501 McPherson Dr	N/A								check
City	State	Zip Code	M		D		Y		Amount
Blacklick	O H	43004	0	4	1	1	1	1	44.00
Full Name of Contributor	Registration Number of PAC								
Rebecca A Love									
Street Address	Employer/Occupation/Labor Organization*								Form (Cash, Check, etc.)
175 Mayfair Blvd	N/A								check
City	State	Zip Code	M		D		Y		Amount
Columbus	O H	43213	0	4	1	1	1	1	84.00
Full Name of Contributor	Registration Number of PAC								
Gayle Oberlitner									
Street Address	Employer/Occupation/Labor Organization*								Form (Cash, Check, etc.)
37 Cleveland Ave	N/A								check
City	State	Zip Code	M		D		Y		Amount
Centerburg	O H	43011	0	4	1	1	1	1	22.00
Full Name of Contributor	Registration Number of PAC								
Karen Renyolds									
Street Address	Employer/Occupation/Labor Organization*								Form (Cash, Check, etc.)
1448 Glenn Ave	N/A								check
City	State	Zip Code	M		D		Y		Amount
Columbus	O H	43212	0	4	1	1	1	1	119.00
Full Name of Contributor	Registration Number of PAC								
Julie A. Buxton									
Street Address	Employer/Occupation/Labor Organization*								Form (Cash, Check, etc.)
8142 Chapel Stone Rd	N/A								check
City	State	Zip Code	M		D		Y		Amount
Blacklick	O H	43004	0	4	1	1	1	1	22.00
Full Name of Contributor	Registration Number of PAC								
Candell L. Looman									
Street Address	Employer/Occupation/Labor Organization*								Form (Cash, Check, etc.)
416 Scandia St.	N/A								check
City	State	Zip Code	M		D		Y		Amount
Blacklick	O H	43004	0	4	1	1	1	1	22.00
Full Name of Contributor	Registration Number of PAC								
Beverly A. Shaffer									
Street Address	Employer/Occupation/Labor Organization*								Form (Cash, Check, etc.)
5025 W. Jefferson Kiousville	N/A								check
City	State	Zip Code	M		D		Y		Amount
London	O H	43140	0	4	0	5	1	1	22.00

* 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 $ 379.00