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 of PAC | |
| Amy Frick | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 255 Marjoram Dr. | N/A | | | | | | check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Gahanna | O H | 43220 | 0 4 | 0 6 | 1 1 | | 44.00 | |
| Full Name of Contributor | | | | | | | Registration Number of PAC | |
| Robin J. Ryan | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 11092 Red Fox Street | N/A | | | | | | check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Canal Winchester | O H | 43110 | 0 4 | 0 5 | 1 1 | | 31.00 | |
| Full Name of Contributor | | | | | | | Registration Number of PAC | |
| Lynn P Legg | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 5831 Saltzgarber | N/A | | | | | | check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Groveport | O H | 43125 | 0 3 | 2 9 | 1 1 | | 33.00 | |
| Full Name of Contributor | | | | | | | Registration Number of PAC | |
| Beth E. Walter | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 160 Dorrence Rd | N/A | | | | | | check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Granville | O H | 43023 | 0 3 | 3 0 | 1 1 | | 33.00 | |
| Full Name of Contributor | | | | | | | Registration Number of PAC | |
| Linda Lee Dudley | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 4065 E. Mound St | N/A | | | | | | check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Columbus | O H | 43227 | 0 4 | 0 4 | 1 1 | | 11.00 | |
| Full Name of Contributor | | | | | | | Registration Number of PAC | |
| Beverly J Ryan | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 173 Longfellow Ave | N/A | | | | | | check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Wothington | O H | 43085 | 0 4 | 0 3 | 1 1 | | 74.00 | |
| Full Name of Contributor | | | | | | | Registration Number of PAC | |
| Nancy E. Taggart | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 5040 Goose Ln | N/A | | | | | | check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Alexandria | O H | 43001 | 0 3 | 3 1 | 1 1 | | 33.00 | |
| Full Name of Contributor | | | | | | | Registration Number of PAC | |
| Rose M. Sawyers | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 1160 Belle Meade Pl | N/A | | | | | | check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Westerville | O H | 43081 | 0 4 | 0 5 | 1 1 | | 44.00 | |

* 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 $ 303.00