

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Yassenoff							
Full Name of Contributor Ben Kaiser					Registration Number, if PAC		
Street Address 666 Mohawk Street		Employer/Occupation/Labor Organization* Ohio Governor's Office			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43206	M 0 6	D 0 4	Y 1 1	Amount 50.00	
Full Name of Contributor Ben Yoho					Registration Number, if PAC		
Street Address 30 West Tompkins		Employer/Occupation/Labor Organization* Ohio House of Reps.			Form (Cash, Check, etc.) Cash		
City Columbus	State O H	Zip Code 43202	M 0 6	D 0 4	Y 1 1	Amount 70.00	
Full Name of Contributor Kevin Binlge					Registration Number, if PAC		
Street Address 408 East Schreyer Place		Employer/Occupation/Labor Organization* Self Employed			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43214	M 0 6	D 0 5	Y 1 1	Amount 35.00	
Full Name of Contributor Carol Blazar					Registration Number, if PAC		
Street Address 861 Noe-Bixby Road		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43213	M 0 6	D 0 5	Y 1 1	Amount 100.00	
Full Name of Contributor Matt Ferris					Registration Number, if PAC		
Street Address 324 East Sycamore Street		Employer/Occupation/Labor Organization* Ferris & Associates			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43296	M 0 6	D 0 5	Y 1 1	Amount 100.00	
Full Name of Contributor Scott Schweitzer					Registration Number, if PAC		
Street Address 5283 Port Haven Drive		Employer/Occupation/Labor Organization* Best Effort			Form (Cash, Check, etc.) Check		
City Galena	State O H	Zip Code 43021	M 0 6	D 0 5	Y 1 1	Amount 75.00	
Full Name of Contributor Citizens for Duffey					Registration Number, if PAC		
Street Address 645 Farrington Drive		Employer/Occupation/Labor Organization* Ohio House of Reps.			Form (Cash, Check, etc.) Check		
City Worthington	State O H	Zip Code 43085	M 0 6	D 0 6	Y 1 1	Amount 100.00	
Full Name of Contributor Citizens for Mingo					Registration Number, if PAC		
Street Address 12364 Throughbred Drive		Employer/Occupation/Labor Organization* Franklin County Auditor			Form (Cash, Check, etc.) Check		
City Pickerington	State O H	Zip Code 43147	M 0 6	D 0 6	Y 1 1	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)]