

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Ted Berry									
Full Name of Contributor Frost Brown Todd LLC Political Action Committee							Registration Number, if PAC OH783		
Street Address 301 East Fourth Street, Suite 3300				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Cincinnati		State OH		Zip Code 45202		M 1		D 0	
						Y 2		Amount \$500.00	
Full Name of Contributor Vincent Romanelli							Registration Number, if PAC		
Street Address 6745 Temperance Pt St				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Westerville		State OH		Zip Code 43082		M 1		D 0	
						Y 2		Amount \$1,000.00	
Full Name of Contributor Edward A Bacome							Registration Number, if PAC		
Street Address 5400 Muirfield Court				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Dublin		State OH		Zip Code 43017		M 1		D 0	
						Y 2		Amount \$1,000.00	
Full Name of Contributor Frank J Cipriano							Registration Number, if PAC		
Street Address PO Box 1942				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Dublin		State OH		Zip Code 43017		M 1		D 0	
						Y 2		Amount \$200.00	
Full Name of Contributor Deno J Duros							Registration Number, if PAC		
Street Address 220 Bridge St, Suite 100, PO Box 357				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Dublin		State OH		Zip Code 43017		M 1		D 0	
						Y 2		Amount \$200.00	
Full Name of Contributor Carol S Zanetos							Registration Number, if PAC		
Street Address 4201 Randmore Ct				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43220		M 1		D 0	
						Y 2		Amount \$200.00	
Full Name of Contributor Charles Tzagournis							Registration Number, if PAC		
Street Address 4911 Stonehaven Dr				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43220		M 1		D 0	
						Y 2		Amount \$200.00	
Full Name of Contributor Mark Wagenbrenner							Registration Number, if PAC		
Street Address 2255 Tremont Rd				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43221		M 1		D 0	
						Y 2		Amount \$300.00	

* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$3,600.00**