

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

|  |  |                    |  |   |  |                             |                             |  |  |
|--|--|--------------------|--|---|--|-----------------------------|-----------------------------|--|--|
| Name of Committee in Full<br><b>Citizens for Roseann Hicks</b> |  |                    |  |   |  |                             |                             |  |  |
| Full Name of Contributor<br><b>Steve Shope</b>                 |  |                    |  |   |  |                             | Registration Number, if PAC |  |  |
| Street Address<br><b>4560 Karl Rd.</b>                         |  |                    |  | Employer/Occupation/Labor Organization*<br><b>City of Columbus</b>    |  |                             |                             | Form (Cash, Check, etc.)<br><b>Cash</b>  |  |
| City<br><b>Columbus</b>  |  | State<br><b>OH</b> |  | Zip Code<br><b>43224</b>  |  | M D Y<br><b>0 5 2 8 0 9</b> |                             | Amount<br><b>\$10.00</b>                 |  |
| Full Name of Contributor<br><b>Ron Richardson</b>              |  |                    |  |   |  |                             | Registration Number, if PAC |  |  |
| Street Address<br><b>4363 Glenmawr Ave.</b>                    |  |                    |  | Employer/Occupation/Labor Organization*<br><b>Roofing Dynamics</b>    |  |                             |                             | Form (Cash, Check, etc.)<br><b>Cash</b>  |  |
| City<br><b>Columbus</b>  |  | State<br><b>OH</b> |  | Zip Code<br><b>43224</b>  |  | M D Y<br><b>0 5 2 8 0 9</b> |                             | Amount<br><b>\$25.00</b>                 |  |
| Full Name of Contributor<br><b>Stephanie Packer</b>            |  |                    |  |   |  |                             | Registration Number, if PAC |  |  |
| Street Address<br><b>6513 Benjamin Dr.</b>                     |  |                    |  | Employer/Occupation/Labor Organization*<br><b>At&amp;t</b>            |  |                             |                             | Form (Cash, Check, etc.)<br><b>Check</b> |  |
| City<br><b>Reynoldsburg</b>                                    |  | State<br><b>OH</b> |  | Zip Code<br><b>43068</b>  |  | M D Y<br><b>0 5 2 9 0 9</b> |                             | Amount<br><b>\$25.00</b>                 |  |
| Full Name of Contributor<br><b>Verna Kaiser</b>                |  |                    |  |   |  |                             | Registration Number, if PAC |  |  |
| Street Address<br><b>196 Swainford Dr.</b>                     |  |                    |  | Employer/Occupation/Labor Organization*<br><b>Retired</b>             |  |                             |                             | Form (Cash, Check, etc.)<br><b>Check</b> |  |
| City<br><b>Heath</b>   |  | State<br><b>OH</b> |  | Zip Code<br><b>43056</b>  |  | M D Y<br><b>0 5 3 0 0 9</b> |                             | Amount<br><b>\$25.00</b>                 |  |
| Full Name of Contributor<br><b>Robert L. Croye</b>             |  |                    |  |   |  |                             | Registration Number, if PAC |  |  |
| Street Address<br><b>1282 Fenceway Dr.</b>                     |  |                    |  | Employer/Occupation/Labor Organization*<br><b>Retired</b>             |  |                             |                             | Form (Cash, Check, etc.)<br><b>Check</b> |  |
| City<br><b>Columbus</b>  |  | State<br><b>OH</b> |  | Zip Code<br><b>43229</b>  |  | M D Y<br><b>0 6 0 2 0 9</b> |                             | Amount<br><b>\$50.00</b>                 |  |
| Full Name of Contributor<br><b>Janet Searl</b>                 |  |                    |  |   |  |                             | Registration Number, if PAC |  |  |
| Street Address<br><b>4727 Heaton Rd.</b>                       |  |                    |  | Employer/Occupation/Labor Organization*<br><b>Retired</b>             |  |                             |                             | Form (Cash, Check, etc.)<br><b>Cash</b>  |  |
| City<br><b>Columbus</b>  |  | State<br><b>OH</b> |  | Zip Code<br><b>43229</b>  |  | M D Y<br><b>0 6 0 3 0 9</b> |                             | Amount<br><b>\$25.00</b>                 |  |
| Full Name of Contributor<br><b>Cynthia L. Ruccia</b>           |  |                    |  |   |  |                             | Registration Number, if PAC |  |  |
| Street Address<br><b>1036 Grandon Ave.</b>                     |  |                    |  | Employer/Occupation/Labor Organization*<br><b>Mary Kay Consultant</b> |  |                             |                             | Form (Cash, Check, etc.)<br><b>Check</b> |  |
| City<br><b>Columbus</b>  |  | State<br><b>OH</b> |  | Zip Code<br><b>43209</b>  |  | M D Y<br><b>0 6 0 5 0 9</b> |                             | Amount<br><b>\$14.25</b>                 |  |
| Full Name of Contributor<br><b>Gloria Apple</b>                |  |                    |  |   |  |                             | Registration Number, if PAC |  |  |
| Street Address<br><b>940 Marland Dr. S.</b>                    |  |                    |  | Employer/Occupation/Labor Organization*<br><b>Yogi's Hoagies</b>      |  |                             |                             | Form (Cash, Check, etc.)<br><b>Cash</b>  |  |
| City<br><b>Columbus</b>  |  | State<br><b>OH</b> |  | Zip Code<br><b>43224</b>  |  | M D Y<br><b>0 6 0 7 0 9</b> |                             | Amount<br><b>\$100.00</b>                |  |

\* 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 **\$274.25**