

Statement of Contributions Received

Prescribed by Secretary of State 8/95

Name of Committee in Full									
Citizens Committee for Persons with M.R.									
Full Name of Contributor							Registration Number, if PAC		
Marianne McLament									
Street Address				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
2505 Bexford Pl.							Check		
City				State		Zip Code		M D Y	
Columbus				OH		43209		022008	
Full Name of Contributor							Registration Number, if PAC		
Linda Fleming									
Street Address				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
1452 Sedgefield Dr.							Check		
City				State		Zip Code		M D Y	
Columbus				OH		43054		022008	
Full Name of Contributor							Registration Number, if PAC		
Lorrene Taftya									
Street Address				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
45 Zellers Lane							Check		
City				State		Zip Code		M D Y	
Columbus Pataskala				OH		43062		022008	
Full Name of Contributor							Registration Number, if PAC		
Jerome Rose									
Street Address				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
1543 Ottawa Dr. N.W.							Check		
City				State		Zip Code		M D Y	
Columbus				OH		43110		022008	
Full Name of Contributor							Registration Number, if PAC		
Sally Harrington									
Street Address				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
2555 Darwin Dr.							Check		
City				State		Zip Code		M D Y	
Columbus				OH		43235		022008	
Full Name of Contributor							Registration Number, if PAC		
Linda Gerber									
Street Address				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
4720 Estabrook Rd.							Check		
City				State		Zip Code		M D Y	
Columbus				OH		43229		022008	
Full Name of Contributor							Registration Number, if PAC		
John Wagner									
Street Address				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
3256 Whitehead Rd.							Check		
City				State		Zip Code		M D Y	
Columbus				OH		43204		022008	

*Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation rather than employer should be listed. If two or more employees donate 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 \$ 780