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, if PAC	
Marianne W. Male							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
438 Sutterton Drive	N/A						check
City	State	Zip Code	M	D	Y		Amount
Gahanna	OH	43230	11	09	10		25.00
Full Name of Contributor						Registration Number, if PAC	
Dianne S. Kimberling							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
251 Brookhaven Dr. N.	N/A						check
City	State	Zip Code	M	D	Y		Amount
Gahanna	OH	43230	11	09	10		25.00
Full Name of Contributor						Registration Number, if PAC	
Kara Fowler							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
5610 Spring River Ave	N/A						check
City	State	Zip Code	M	D	Y		Amount
Dublin	OH	43016	11	16	10		25.00
Full Name of Contributor						Registration Number, if PAC	
Jean H. Hahn							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
5801 Sinclair Road	N/A						check
City	State	Zip Code	M	D	Y		Amount
Columbus	OH	43229	11	05	10		25.00
Full Name of Contributor						Registration Number, if PAC	
Erick N. Berquist							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
3417 Klondike Rd.							
City	State	Zip Code	M	D	Y		Amount
Delaware	OH	43015	11	04	10		25.00
Full Name of Contributor						Registration Number, if PAC	
Sarah Stuzman							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
2938 Monarch Dr.	N/A						check
City	State	Zip Code	M	D	Y		Amount
Columbus	OH	43235	11	07	10		25.00
Full Name of Contributor						Registration Number, if PAC	
Jamie L. Doane							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
748 Rothrock Dr.							
City	State	Zip Code	M	D	Y		Amount
Galloway	OH	43119	11	09	10		25.00
Full Name of Contributor						Registration Number, if PAC	
Barbara E. Campbell							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
2226 Nottingham Road	N/A						check
City	State	Zip Code	M	D	Y		Amount
Columbus	OH	43221	10	08	10		25.00

* 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 $ 200.00