31-A
R.C. 3517.10

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	Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	City	State	Zip Code	M	D	Y	Amount
Living Skills Center		4200 Bixby Road	N/A	check	Grovesport	OH	43125	07	14	10	100.00
Service Coordination		1600 Watermark Drive	N/A	check	Columbus	OH	43215	06	25	10	109.00
Service Coordination		1600 Watermark Drive	N/A	check	Columbus	OH	43215	06	15	10	123.00
Service Coordination		1600 Watermark Drive	N/A	check	Columbus	OH	43215	06	04	10	83.00

* 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 $ 415.00