

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for David DeCapua							
Full Name of Contributor Randy Gerber					Registration Number, if PAC		
Street Address 1675 Roxbury Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) online		
City Columbus	State O H	Zip Code 43212	M 0 8	D 1 5	Y 0 9	Amount 250.00	
Full Name of Contributor Emily Gerber					Registration Number, if PAC		
Street Address 1675 Roxbury Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) online		
City Columbus	State O H	Zip Code 43212	M 0 8	D 1 5	Y 0 9	Amount 250.00	
Full Name of Contributor Dan Lhota					Registration Number, if PAC		
Street Address 2300 Tremont Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) online		
City Columbus	State O H	Zip Code 43221	M 0 8	D 2 0	Y 0 9	Amount 100.00	
Full Name of Contributor Alex Fischer					Registration Number, if PAC		
Street Address 2278 Cambridge Boulevard		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) online		
City Columbus	State O H	Zip Code 43221	M 0 9	D 1 6	Y 0 9	Amount 250.00	
Full Name of Contributor Greg Moss					Registration Number, if PAC		
Street Address 2532 Welsford Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) online		
City Columbus	State O H	Zip Code 43221	M 0 9	D 1 6	Y 0 9	Amount 100.00	
Full Name of Contributor Cameron Mitchell					Registration Number, if PAC		
Street Address 515 Park Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) online		
City Columbus	State O H	Zip Code 43215	M 0 8	D 2 0	Y 0 9	Amount 100.00	
Full Name of Contributor Maria Arend					Registration Number, if PAC		
Street Address 4930 Reed Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) online		
City Columbus	State O H	Zip Code 43220	M 0 8	D 2 5	Y 0 9	Amount 100.00	
Full Name of Contributor John Sokol					Registration Number, if PAC		
Street Address 2561 Clarion Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) online		
City Columbus	State O H	Zip Code 43221	M 0 8	D 2 8	Y 0 9	Amount 100.00	

* 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 \$ 1,250.00