## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full				A Proposition of the Proposition
Citizens for Frank Ciotola Registration Number, if PAC				
Full Name of Contributor			Registration Number, if PA	10
L. Jack Ruscilli	D 1 /O	tion II abox Orognization *		Form (Cash, Check, etc.)
	Employer/Occupa	tion/Labor Organization*		Check
1957 Lake Shore Drive	State	Zip Code	M D Y	Amount
Columbus	ОĤ	43204	050709	\$100.00
Columbus Full Name of Contributor	1		Registration Number, if Pa	AC
Diana Duras				
Diana Duros Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
1604 Essex Road				<u>Check</u>
City	State	Zip Code	M D Y	Amount
Columbus	ОН	43221	0 5 L 6 0 9	\$100.00
Full Name of Contributor Registration Number, if PAC				
Gina Romanelli	In 1 1/2	· // / - O	L	Form (Cash, Check, etc.)
Street Address	Employer/Occupa	tion/Labor Organization*		
6745 Temperance Pt	State	Zip Code	M D Y	Check Amount
·	OH	1	650000	\$100.00
Westerville Full Name of Contributor		1 43082	Registration Number, if P	
Menual Traccournis				
Manuel Tzagournis Street Address	Employer/Occupa	ation/Labor Organization*		Form (Cash, Check, etc.)
4335 Sawmill Rd.				Check
City	State	Zip Code	M D Y	Amount
Columbus	OH	43220	051909	\$75.00
Full Name of Contributor  Registration Number, if PAC '				
Tonia Erdman Street Address	I	·		Form (Cash, Check, etc.)
	Employer/Occup	ation/Labor Organization*		
1515 Bridgeton Drive	State	Zip Code	M D Y	Check Amount
City	ОН	43220	05200	\$100.00
Columbus Full Name of Contributor		143///	Registration Number, if I	
Thomas R. Brownlee, Jr				
Street Address	Employer/Occup	ation/Labor Organization*		Form (Cash, Check, etc.)
3360 Westbury Drive				Check
City	State	Zip Code	M D Y	Amount
Columbus	OH	43221-1585	05190	rakan na katan dan bankan bankan dan bankan dan bankan dan bankan dan bankan dan bankan
Full Name of Contributor			Registration Number, if I	TAC
Robert T. Whetzel	1	<b>7</b> 1 0		Form (Cash, Check, etc.)
Street Address	Employer/Occup	ation/Labor Organization*		Check
4245 Greensview Drive	State	Zip Code	M D Y	Amount
Columbus	OH	43220	052009	\$100.00
Columbus Full Name of Contributor	Registration Number			······································
Uilos Boylo Burkholder Bringardner Co., L.P.A. CP-1058				
Wiles, Doyle, Bulking ruer, Dilligar Street Address	Employer/Occup	ation/Labor Organization*	E	Form (Cash, Check, etc.)
300 Spruce Street				Check
City	State	Zip Code	M D Y	Amount
Columbus	OH	43215	052209	\$100.00

Page Total \$ 750.00

<sup>\*</sup> 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)]