

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Frank Ciotola									
Full Name of Contributor L. Jack Ruscilli						Registration Number, if PAC			
Street Address 1957 Lake Shore Drive			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43204		M D Y 0 5 0 7 0 9		Amount \$100.00	
Full Name of Contributor Diana Duros						Registration Number, if PAC			
Street Address 1604 Essex Road			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M D Y 0 5 1 6 0 9		Amount \$100.00	
Full Name of Contributor Gina Romanelli						Registration Number, if PAC			
Street Address 6745 Temperance Pt			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Westerville		State OH		Zip Code 43082		M D Y 0 5 2 0 0 9		Amount \$100.00	
Full Name of Contributor Manuel Tzagournis						Registration Number, if PAC			
Street Address 4335 Sawmill Rd.			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43220		M D Y 0 5 1 9 0 9		Amount \$75.00	
Full Name of Contributor Tonia Erdman						Registration Number, if PAC			
Street Address 1515 Bridgeton Drive			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43220		M D Y 0 5 2 0 0 9		Amount \$100.00	
Full Name of Contributor Thomas R. Brownlee, Jr						Registration Number, if PAC			
Street Address 3360 Westbury Drive			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221-1585		M D Y 0 5 1 9 0 9		Amount \$75.00	
Full Name of Contributor Robert T. Whetzel						Registration Number, if PAC			
Street Address 4245 Greensview Drive			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43220		M D Y 0 5 2 0 0 9		Amount \$100.00	
Full Name of Contributor Wiles, Boyle, Burkholder, Bringardner Co., L.P.A.						Registration Number, if PAC CP-1058			
Street Address 300 Spruce Street			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43215		M D Y 0 5 2 2 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 also appear. [R.C. 3517.10(B)(4)]

Page Total \$ 750.00