

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 Lilian R. Beck					Registration Number, if PAC		
Street Address 636 Northridge Rd.		Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check		
City Columbus	State O	H H	Zip Code 43214	M 1	D 1	Y 0	Amount 25.00
Full Name of Contributor Margene Boyer					Registration Number, if PAC		
Street Address 179 Mathew Ave		Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check		
City Westerville	State O	H H	Zip Code 43081	M 0	D 9	Y 1	Amount 25.00
Full Name of Contributor Ta'Mika M McCluney					Registration Number, if PAC		
Street Address 3164 Stoudt Pl.		Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check		
City Canal Winchester	State O	H H	Zip Code 43110	M 1	D 1	Y 0	Amount 25.00
Full Name of Contributor Jason K. Justice					Registration Number, if PAC		
Street Address 9023 Barley Loft Dr.		Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check		
City Columbus	State O	H H	Zip Code 43240	M 1	D 0	Y 8	Amount 25.00
Full Name of Contributor Danielle Envoy					Registration Number, if PAC		
Street Address 181 Beechbank Rd.		Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check		
City Whitehall	State O	H H	Zip Code 43213	M 1	D 1	Y 6	Amount 25.00
Full Name of Contributor Debora Wellmes					Registration Number, if PAC		
Street Address 2270 Lilacwood Ave		Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check		
City Columbus	State O	H H	Zip Code 43229	M 1	D 0	Y 8	Amount 25.00
Full Name of Contributor Deborah K. Stewart					Registration Number, if PAC		
Street Address 1339 Charles St.		Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check		
City Logan	State O	H H	Zip Code 43138	M 1	D 1	Y 6	Amount 25.00
Full Name of Contributor Tanna L. Blackman					Registration Number, if PAC		
Street Address 545 South Lane		Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check		
City Columbus	State O	H H	Zip Code 43206	M 1	D 1	Y 0	Amount 50.00

* 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 \$ 225.00