

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full CITIZENS FOR BERYL D. ANDERSON						
Full Name of Contributor DEBRA HILL <i>DEBBRA HILL</i>				Registration Number, if PAC		
Street Address 5736 WEST RACE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City CHICAGO	State IL	Zip Code 60644	M 0	D 5	Y 0715	Amount \$20.00
Full Name of Contributor SADIKA WHITE <i>SADIKA WHITE</i>				Registration Number, if PAC		
Street Address 4009 CHELSA BRIDGE LANE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State OH	Zip Code 43230	M 0	D 5	Y 1515	Amount \$100.00
Full Name of Contributor SUZANNE TOLBERT				Registration Number, if PAC		
Street Address 537 STRATHSHIRE LANE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City GAHANNA	State OH	Zip Code 43230	M 0	D 5	Y 1515	Amount \$100.00
Full Name of Contributor OLIVIA JOHNSON				Registration Number, if PAC		
Street Address 2046 WILLOW GLEN LANE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State OH	Zip Code 43229	M 0	D 6	Y 0615	Amount \$100.00
Full Name of Contributor SIMONE WILLIAMS				Registration Number, if PAC		
Street Address 5540 KETCH ST		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City LEWIS CENTER	State OH	Zip Code 43035	M 0	D 6	Y 0615	Amount \$100.00
Full Name of Contributor RAE ARNOLD				Registration Number, if PAC		
Street Address 5566 ST. ANDREWS DRIVE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CASH	
City WESTERVILLE	State OH	Zip Code 43082	M 0	D 5	Y 1615	Amount \$25.00
Full Name of Contributor HOPE HURST				Registration Number, if PAC		
Street Address 1728 COLE ST		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CASH	
City COLUMBUS	State OH	Zip Code 43205	M 0	D 4	Y 2515	Amount \$15.00
Full Name of Contributor VICTORIA JACKSON				Registration Number, if PAC		
Street Address 1377 SOUT ROOSEVELT AVE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CASH	
City COLUMBUS	State OH	Zip Code 43209	M 0	D 4	Y 2515	Amount \$15.00

* 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 **\$475.00**