

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens to Elect Ganoom									
Full Name of Contributor William Grabel						Registration Number, if PAC			
Street Address 2140 N Parkway Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M 1	D 0	Y 3	Amount \$250.00
Full Name of Contributor William Roberts						Registration Number, if PAC			
Street Address 1900 Ridgeview Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M 1	D 0	Y 3	Amount \$100.00
Full Name of Contributor Guido Mislin						Registration Number, if PAC			
Street Address 4450 Haverford Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43220		M 1	D 0	Y 3	Amount \$100.00
Full Name of Contributor Suzanne Cruickshank						Registration Number, if PAC			
Street Address 2817 Wickliffe Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43221		M 1	D 0	Y 3	Amount \$100.00
Full Name of Contributor Edward Cavezza						Registration Number, if PAC			
Street Address 7677 Sutton Pl			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City New Albany		State OH		Zip Code 43054		M 1	D 0	Y 5	Amount \$250.00
Full Name of Contributor Robert Crotty						Registration Number, if PAC			
Street Address 2450 Bloxom St			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City		State OH		Zip Code 43123		M 1	D 0	Y 5	Amount \$250.00
Full Name of Contributor Dave Turner						Registration Number, if PAC			
Street Address 2737 Wexford Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Columbus		State OH		Zip Code 43221		M 1	D 0	Y 2	Amount \$10.00
Full Name of Contributor Gayle Howard						Registration Number, if PAC			
Street Address 2784 Swansea Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Columbus		State OH		Zip Code 43221		M 1	D 0	Y 2	Amount \$10.00

* 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 **\$1,070.00**