

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Leeseberg							
Full Name of Contributor Chad Downing-Point Plus Personnel					Registration Number, if PAC		
Street Address 155 W. Johnstown		Employer/Occupation/Labor Organization* Point Plus Personnel/Owner			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 0 7	D 0 5	Y 1 3	Amount 200.00	
Full Name of Contributor Cyndi Abdon					Registration Number, if PAC		
Street Address 144 N. Gould		Employer/Occupation/Labor Organization* Kayne Law Group/Admin Asst			Form (Cash, Check, etc.)		
City Columbus	State O H	Zip Code 43209	M 1 0	D 0 9	Y 1 3	Amount 235.00	
Full Name of Contributor Oliver Damschroder					Registration Number, if PAC		
Street Address 5053 Killowen Ct		Employer/Occupation/Labor Organization* American Structurepoint/Design Man.			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43230	M 1 0	D 0 8	Y 1 3	Amount 20.00	
Full Name of Contributor Andrew Martin					Registration Number, if PAC		
Street Address 351 Linwood Ave		Employer/Occupation/Labor Organization* URS/Designer			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43205	M 1 0	D 1 2	Y 1 3	Amount 50.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

* 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)]