

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens to re-elect Edward Dildine						
Full Name of Contributor IBEW PAC Voluntary				Registration Number, if PAC 52-6147771		
Street Address 900 Seventh Street N.W.		Employer/Occupation/Labor Organization* IBEW			Form (Cash, Check, etc.) Ck	
City Washington	State DC	Zip Code 20001	M 0	D 7	Y 3	Amount \$500.00
Full Name of Contributor Larry James				Registration Number, if PAC		
Street Address 500 South High Street		Employer/Occupation/Labor Organization* Crabbe, Brown & James Attorneys			Form (Cash, Check, etc.) CK	
City Columbus	State OH	Zip Code 43209	M 0	D 8	Y 0	Amount \$100.00
Full Name of Contributor Columbus Franklin County AFL_CIO_PCE				Registration Number, if PAC 31-4446019		
Street Address 1545 Alum Creek Drive		Employer/Occupation/Labor Organization* Labor			Form (Cash, Check, etc.) CK	
City Columbus	State OH	Zip Code 43209	M 0	D 7	Y 1	Amount \$400.00
Full Name of Contributor IBEW PAC Voluntary				Registration Number, if PAC		
Street Address 900 Seventh Street N.W.		Employer/Occupation/Labor Organization* IBEW			Form (Cash, Check, etc.) CK	
City Washington	State DC	Zip Code 20001	M 0	D 9	Y 1	Amount \$250.00
Full Name of Contributor United Steel Workers				Registration Number, if PAC 6210		
Street Address 777 Dearborn Park Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CK	
City Columbus	State OH	Zip Code 43085	M 1	D 0	Y 1	Amount \$500.00
Full Name of Contributor Barabara Miller				Registration Number, if PAC		
Street Address 6293 Ballmer Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CK	
City Canal Winchester	State OH	Zip Code 43110	M 0	D 7	Y 1	Amount \$100.00
Full Name of Contributor Aimee Marburger				Registration Number, if PAC		
Street Address 170 Green Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CK	
City Groveport	State OH	Zip Code 43125	M 0	D 7	Y 1	Amount \$60.00
Full Name of Contributor Alissa Lacey				Registration Number, if PAC		
Street Address 153 Green Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CK	
City Groveport	State OH	Zip Code 43125	M 0	D 7	Y 1	Amount \$20.00

* 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)]