

Statement of Contributions Received

Prescribed by Secretary of State 3/05

| | | | | | | | |
|---|----------------|---|------------|------------|------------------------------------|------------------|--|
| Name of Committee in Full Citizens for David DeCapua | | | | | | | |
| Full Name of Contributor Brian Hall | | | | | Registration Number, if PAC | | |
| Street Address 1937 Collingswood Road | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) online | | |
| City Columbus | State O H | Zip Code 43221 | M 0 9 | D 0 3 | Y 0 9 | Amount 100.00 | |
| Full Name of Contributor Allen Handlan | | | | | Registration Number, if PAC | | |
| Street Address 2354 Kensington Road | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) online | | |
| City Columbus | State O H | Zip Code 43221 | M 0 9 | D 0 5 | Y 0 9 | Amount 50.00 | |
| Full Name of Contributor Brad Underwood | | | | | Registration Number, if PAC | | |
| Street Address 1661 Cardiff Road | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) online | | |
| City Columbus | State O H | Zip Code 43221 | M 0 9 | D 1 8 | Y 0 9 | Amount 150.00 | |
| Full Name of Contributor Lisa Doran | | | | | Registration Number, if PAC | | |
| Street Address 4516 Amity Road | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) online | | |
| City Hilliard | State O H | Zip Code 43026 | M 0 9 | D 1 9 | Y 0 9 | Amount 50.00 | |
| Full Name of Contributor Allen Handlan | | | | | Registration Number, if PAC | | |
| Street Address 2354 Kensington Road | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) online | | |
| City Columbus | State O H | Zip Code 43221 | M 0 9 | D 2 6 | Y 0 9 | Amount 50.00 | |
| Full Name of Contributor Lisa Ingram Guy | | | | | Registration Number, if PAC | | |
| Street Address 2395 Club Road | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) online | | |
| City Columbus | State O H | Zip Code 43221 | M 0 9 | D 3 0 | Y 0 9 | Amount 250.00 | |
| Full Name of Contributor John Sokol | | | | | Registration Number, if PAC | | |
| Street Address 2561 Clarion Court | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) online | | |
| City Columbus | State O H | Zip Code 43220 | M 0 9 | D 3 0 | Y 0 9 | Amount 150.00 | |
| Full Name of Contributor Edward Foster | | | | | Registration Number, if PAC | | |
| Street Address 1988 Berkshire Road | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) online | | |
| City Columbus | State O H | Zip Code 43221 | M 1 0 | D 0 1 | Y 0 9 | Amount 250.00 | |

* 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 \$ 1,050.00