

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens Committee for Persons with M.R.							
Full Name of Contributor Theresa L Cohagan						Registration Number, if PAC	
Street Address 197 W Brighton Road			Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check	
City Columbus		State O H	Zip Code 43202	M 0 3	D 1 7	Y 1 0	Amount 81.00
Full Name of Contributor Donna Hulse						Registration Number, if PAC	
Street Address 180 Riva Ridge Road			Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check	
City Pataskala		State O H	Zip Code 43062	M 0 3	D 1 9	Y 1 0	Amount 33.00
Full Name of Contributor Karen F. Smathers						Registration Number, if PAC	
Street Address 8332 Honda Ridge Road			Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check	
City Thornville		State O H	Zip Code 43076	M 0 3	D 1 8	Y 1 0	Amount 48.00
Full Name of Contributor Brian K. Parks						Registration Number, if PAC	
Street Address 348 Parkdale Rd.			Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check	
City West Jefferson		State O H	Zip Code 43162	M 0 3	D 2 9	Y 1 0	Amount 55.00
Full Name of Contributor Gretchen Geckle Brooks						Registration Number, if PAC	
Street Address 933 Ridenour Rd			Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check	
City Gahanna		State O H	Zip Code 43230	M 0 3	D 2 8	Y 1 0	Amount 11.00
Full Name of Contributor Classic Clip						Registration Number, if PAC	
Street Address 307 W. Johnstown Rd.			Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check	
City Gahanna		State O H	Zip Code 43230	M 0 3	D 3 0	Y 1 0	Amount 55.00
Full Name of Contributor Jessica Hudson						Registration Number, if PAC	
Street Address 698 Powhatan Ave			Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check	
City Columbus		State O H	Zip Code 43204	M 0 3	D 2 9	Y 1 0	Amount 22.00
Full Name of Contributor Jamie D Shoemaker						Registration Number, if PAC	
Street Address 10666 Adams Rd			Employer/Occupation/Labor Organization* N/A			Form (Cash, Check, etc.) check	
City Galena		State O H	Zip Code 43021	M 0 3	D 2 5	Y 1 0	Amount 22.00

* 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)]