

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for David DeCapua							
Full Name of Contributor Donna Jaske					Registration Number, if PAC		
Street Address 2182 Picket Post Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43220	M 1 1	D 0 4	Y 0 9	Amount 10.00	
Full Name of Contributor Thomas Turner					Registration Number, if PAC		
Street Address 3065 Brandon Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43221	M 1 1	D 0 4	Y 0 9	Amount 50.00	
Full Name of Contributor Committee For Jim Hughes					Registration Number, if PAC		
Street Address 52 E Gay Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43215	M 1 1	D 0 4	Y 0 9	Amount 150.00	
Full Name of Contributor J Troy Terakedis					Registration Number, if PAC		
Street Address 248 Daniel Burnham Square		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) online		
City Columbus	State O H	Zip Code 43215	M 1 0	D 1 5	Y 0 9	Amount 100.00	
Full Name of Contributor Brian Tierney					Registration Number, if PAC		
Street Address 1685 Arlington Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) online		
City Columbus	State O H	Zip Code 43212	M 1 0	D 2 3	Y 0 9	Amount 250.00	
Full Name of Contributor Dan Hackett					Registration Number, if PAC		
Street Address 2615 Wexford Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) online		
City Columbus	State O H	Zip Code 43221	M 1 0	D 2 3	Y 0 9	Amount 100.00	
Full Name of Contributor Andrew Chistman					Registration Number, if PAC		
Street Address 1347 N High Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) online		
City Columbus	State O H	Zip Code 43201	M 1 0	D 2 4	Y 0 9	Amount 50.00	
Full Name of Contributor Carla Sokol					Registration Number, if PAC		
Street Address 2051 Arlington Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) online		
City Columbus	State O H	Zip Code 43221	M 1 0	D 2 6	Y 0 9	Amount 50.00	

* 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 \$ 760.00