

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Yassenoff</b>							
Full Name of Contributor <b>Mike Joyce</b>					Registration Number, if PAC		
Street Address <b>2561 Chester Road</b>		Employer/Occupation/Labor Organization* <b>Best Effort</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Upper Arlington</b>	State <b>O   H</b>	Zip Code <b>43221</b>	M <b>0   8</b>	D <b>2   0</b>	Y <b>1   1</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Anne Sheline</b>					Registration Number, if PAC		
Street Address <b>2383 Dorset Road</b>		Employer/Occupation/Labor Organization* <b>Retired</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Upper Arlington</b>	State <b>O   H</b>	Zip Code <b>43221</b>	M <b>0   8</b>	D <b>2   0</b>	Y <b>1   1</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Julie Yassenoff</b>					Registration Number, if PAC		
Street Address <b>5090 Squirrel Bend</b>		Employer/Occupation/Labor Organization* <b>Student</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Upper Arlington</b>	State <b>O   H</b>	Zip Code <b>43220</b>	M <b>0   8</b>	D <b>2   1</b>	Y <b>1   1</b>	Amount <b>250.00</b>	
Full Name of Contributor <b>Solly Yassenoff</b>					Registration Number, if PAC		
Street Address <b>5090 Squirrel Bend</b>		Employer/Occupation/Labor Organization* <b>Rainbow Development</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Upper Arlington</b>	State <b>O   H</b>	Zip Code <b>43220</b>	M <b>0   8</b>	D <b>2   1</b>	Y <b>1   1</b>	Amount <b>250.00</b>	
Full Name of Contributor <b>Karen Yassenoff</b>					Registration Number, if PAC		
Street Address <b>5090 Squirrel Bend</b>		Employer/Occupation/Labor Organization* <b>Homemaker</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Upper Arlington</b>	State <b>O   H</b>	Zip Code <b>43220</b>	M <b>0   8</b>	D <b>2   1</b>	Y <b>1   1</b>	Amount <b>250.00</b>	
Full Name of Contributor <b>Barbara Lach</b>					Registration Number, if PAC		
Street Address <b>3910 Lyon Drive</b>		Employer/Occupation/Labor Organization* <b>Retired</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Upper Arlington</b>	State <b>O   H</b>	Zip Code <b>43220</b>	M <b>0   8</b>	D <b>2   3</b>	Y <b>1   1</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Stephen Wilson</b>					Registration Number, if PAC		
Street Address <b>707 North Union Avenue</b>		Employer/Occupation/Labor Organization* <b>Ohio House of Reps.</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Salem</b>	State <b>O   H</b>	Zip Code <b>44460</b>	M <b>0   8</b>	D <b>2   3</b>	Y <b>1   1</b>	Amount <b>35.00</b>	
Full Name of Contributor <b>Mike Toomey</b>					Registration Number, if PAC		
Street Address <b>2462 Sherwood Villa</b>		Employer/Occupation/Labor Organization* <b>Self Employed</b>			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Upper Arlington</b>	State <b>O   H</b>	Zip Code <b>43221</b>	M <b>0   8</b>	D <b>2   4</b>	Y <b>1   1</b>	Amount <b>75.00</b>	

\* 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 \$ 1,010.00