

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee or Full						
Citizens Committee for Persons with D.D.						
Full Name of Contributor					Registration Number, if PAC	
John P. LaCivito						
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
7246 Harrisburg & London Rd		N/A			check	
City	State	Zip Code	M	D	Y	Amount
Orient	O H	43146	0	4	1 1 1 1	47.00
Full Name of Contributor					Registration Number, if PAC	
Susan L. Boggs						
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
P.O. Box 234		N/A			check	
City	State	Zip Code	M	D	Y	Amount
Commercial Point	O H	43116	0	4	1 0 1 1	42.00
Full Name of Contributor					Registration Number, if PAC	
Victoria D. McClenaghan						
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
75 S Vine St		N/A			check	
City	State	Zip Code	M	D	Y	Amount
Westerville	O H	43081	0	4	1 1 1 1	156.00
Full Name of Contributor					Registration Number, if PAC	
Victoria D. McClenaghan						
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
75 S Vine St		N/A			check	
City	State	Zip Code	M	D	Y	Amount
Westerville	O H	43081	0	4	1 1 1 1	66.00
Full Name of Contributor					Registration Number, if PAC	
Naomi R. Stevenson						
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
795 S. Hampton Rd.		N/A			check	
City	State	Zip Code	M	D	Y	Amount
Columbus	O H	43227	0	4	0 8 1 1	22.00
Full Name of Contributor					Registration Number, if PAC	
Laura B. Donnelly						
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
7764 Pine Meadow Dr		N/A			check	
City	State	Zip Code	M	D	Y	Amount
New Albany	O H	43054	0	4	1 0 1 1	59.00
Full Name of Contributor					Registration Number, if PAC	
Leah Myers						
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
705 Turcotte Court		N/A			check	
City	State	Zip Code	M	D	Y	Amount
Gahanna	O H	43230	0	4	0 4 1 1	22.00
Full Name of Contributor					Registration Number, if PAC	
Mary Anne Ebner						
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
66 E Broadway		N/A			check	
City	State	Zip Code	M	D	Y	Amount
Westerville	O H	43081	0	4	1 1 1 1	39.00

* 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. (RC 3517-10(B)(4))

Paid Total \$ 453.00