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R	C	3517	10

## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

		1				
Name of Committee in Full						
Citizens for Yassenoff		1				
Full Name of Contributor		Registration Number, if PAC				
Amy Davis						
Street Address	Employer/Occupation/Lal	or Organization*				Form (Cash, Check, etc.)
279 East Beck Street	Best Effort			,		Check
City	State Zip Co		M	D	Y	Amount
Columbus	O H 43	206		2 8		250.00
Full Name of Contributor			Kegistra	tion Num	iber, if PA	C.
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State Zip Co	de	M	D	Y	Amount
Full Name of Contributor		1	Registra	tion Nur	iber, if PA	AC
D. Adding	Employed/Occupation [ 4	or Organization*				Form (Cash, Check, etc.)
Street Address	Employer/Occupation/Labor Organization* Form			i om (casi, check, cic.)		
City	State Zip Co	de	M	D	Y	Amount
					[	
Full Name of Contributor			Registra	ation Nun	iber, if PA	AC
Street Address	Employer/Occupation/La	oor Organization*	ation* Form (Cash, Check, etc.)			
City	State Zip Co	de	M	D	Y	Amount
Full Name of Contributor			Registra	ation Nun	ber, if PA	AC
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Street Address	Employer/Occupation/La	Employer/Occupation/Labor Organization*  Form (Cash, Check, etc.)		romi (Cash, Check, etc.)		
City	State Zip Co	de	M	D	Y	Amount
Full Name of Contributor			Registra	ation Nun	nber, if PA	AC
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
	State Zip Co	1	М	D	Y	Amount
City	State Zip Co	ALC.	"	Ιĭ	ĺ	TUNOLER
Full Name of Contributor			Registr	ation Num	nber, if P	AC
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State Zip Co	xde	M	Ð	Y	Amount
Full Name of Contributor			Registr	ation Nur	nber, if Pa	AC
Street Address	Employer/Occupation/La	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)		
City	State Zip C	ode	М	D	Y	Amount
	<del> </del>		1 1 1	<del></del> _	1 1	

\* 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)]

W. 1997						
Page Total \$	250.00					