

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full CITIZENS FOR MARILEE							
Full Name of Contributor JAMES A FRAZIER					Registration Number, if PAC		
Street Address 8777 SWEETWATER CT		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City POWELL	State O H	Zip Code 43065	M 0	D 9	Y 3	Amount 50.00	
Full Name of Contributor RICHARD C WEBER					Registration Number, if PAC		
Street Address 185 S RIVERVIEW ST		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 0	D 9	Y 3	Amount 50.00	
Full Name of Contributor MARGARET E BUTLER					Registration Number, if PAC		
Street Address 5714 HADDINGTON DR		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 0	D 9	Y 3	Amount 50.00	
Full Name of Contributor WILLIAM HINTON JR					Registration Number, if PAC		
Street Address 5538 CARNOUSTIE CT		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 0	D 9	Y 3	Amount 50.00	
Full Name of Contributor DIANNE P BEALL					Registration Number, if PAC		
Street Address 5828 BARONSCOURT WAY		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43016	M 0	D 9	Y 3	Amount 50.00	
Full Name of Contributor DENISE FRANTZ KING					Registration Number, if PAC		
Street Address 170 S RIVERVIEW ST		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 0	D 9	Y 3	Amount 50.00	
Full Name of Contributor G GREGORY MARQUIS					Registration Number, if PAC		
Street Address 7319 ROYCROFT CT		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 0	D 9	Y 3	Amount 50.00	
Full Name of Contributor MICHAEL E KEHOE					Registration Number, if PAC		
Street Address 7659 WALLSEND CT		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 0	D 9	Y 3	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)]