

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Boy									
Full Name of Contributor Bruce Andrews						Registration Number, if PAC			
Street Address 5265 Bay Meadows Ct			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Columbus		State OH		Zip Code 43221		M 1	D 0	Y 1	Amount \$100.00
Full Name of Contributor Gerard Schlembach						Registration Number, if PAC			
Street Address 625 E 11th Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Columbus		State OH		Zip Code 43211		M 1	D 0	Y 1	Amount \$100.00
Full Name of Contributor Christy Buenconsejo						Registration Number, if PAC			
Street Address 219 Barcelona Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Westerville		State OH		Zip Code 43081		M 1	D 0	Y 1	Amount \$50.00
Full Name of Contributor Bonnie Quist						Registration Number, if PAC			
Street Address 201 S Grant Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) EFT			
City Columbus		State OH		Zip Code 43215		M 1	D 0	Y 1	Amount \$100.00
Full Name of Contributor Donna Buckley						Registration Number, if PAC			
Street Address 4129 Maystar Way			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Hilliard		State OH		Zip Code 43026		M 1	D 0	Y 1	Amount \$50.00
Full Name of Contributor Richard Stage						Registration Number, if PAC			
Street Address 2733 Woodgrove Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Grove City		State OH		Zip Code 43123		M 1	D 0	Y 1	Amount \$250.00
Full Name of Contributor Carolyn Smith						Registration Number, if PAC			
Street Address 914 Linwood Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) EFT			
City Columbus		State OH		Zip Code 43206		M 1	D 0	Y 1	Amount \$100.00
Full Name of Contributor Joseph Olson						Registration Number, if PAC			
Street Address 3730 Ridge Mill Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) EFT			
City Hilliard		State OH		Zip Code 43026		M 1	D 0	Y 1	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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$800.00**