Statement of Contributions Received

Prescribed by Secretary of State 03/05

N CO LINE F.II				
Name of Committee in Full Citizens for Anı	ne Gonzales			
all Name of Contributor			Registration Number, if PAC	
Richard Mannino				
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
1075 Hooverview Drive				check
City	State	Zip Code	M D Y	Amount
Westerville	OH	43082	0 6 2 0 0	8
Full Name of Contributor			Registration Number, it	FPAC
Jan Pfeiffer				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
1173 Hepplewhite Court				check
City	State	Zip Code	M D Y	Amount
Westerville	OH	43081		9 15.00
Full Name of Contributor			Registration Number, i	r PAC
Kevin Hoffman				Trans (Cook Charlesse)
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
1147 Tidewater Court		[g: 0.1	I M I DI LA	check Amount
City	State OH	Zip Code 43081	0 7 2 5 0	9 50.00
Westerville		43001	Registration Number, i	
Full Name of Contributor			registration number, i	1110
Edward Brady	I	* * 1 • 0		Form (Cash, Check, etc.)
Street Address	Employer/Occupation/Labor Organization*			check
96 Ormsbee Avenue	State	Zip Code	M D Y	Amount
City	OH	43081		9 25.00
Westerville Full Name of Contributor		1 -1001	Registration Number, i	
Robert Litt			, J	
Street Address	Employer/Occ	upation/Labor Organization*		Form (Cash, Check, etc.)
728 Collingwood	Employer/Occ	apanon Emoor Organization		check
City	State	Zip Code	M D Y	Amount
Westerville	ОН	43081	0 7 2 1 0	9 40.00
Full Name of Contributor			Registration Number,	fPAC
James Wintzer				
Street Address	Employer/Occ	upation/Labor Organization*		Form (Cash, Check, etc.)
660 Surf Court		•		check
City	State	Zip Code	M D Y	Amount
Westerville	OH	43082	0 9 1 1 0	9 100.00
Full Name of Contributor	and the second s		Registration Number,	if PAC
Thomas Hickey				
Street Address	Employer/Occ	upation/Labor Organization*		Form (Cash, Check, etc.)
972 Maebelle Way				check
City	State	Zip Code	M D Y	Amount
Westerville	OH	43081	0 8 1 0 0	9 50.00
Full Name of Contributor			Registration Number,	if PAC
Committee to Elect Mike Shan				
Street Address	Employer/Occ	upation/Labor Organization*		Form (Cash, Check, etc.)
P O Box 238				check
City	State	Zip Code	M D Y	Amount
Reynoldsburg	OH	43068	0 6 0 2 0	9 250.00

^{*} 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)]