## Statement of Contributions Received

Prescribed by Secretary of State 3/05

V60		Secretary of State 3/05			
Name of Committee in Full					
Citizens for Beryl Piccolanto	onio				
	<del></del>		Registrati	on Number,	if PAC
Laura Repasky			1		
Street Address	Employer/Oc	cupation/Labor Organizati	on*		Form (Cash, Check, etc.)
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	State	Zip Code	M D	Y	Amount
ired for contributions from individuals over \$100 to ste			1   1	1 1	i

\* 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)]

Page Total S	880.00