

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for David DeCapua							
Full Name of Contributor Daniel McCormick					Registration Number, if PAC		
Street Address 3800 Ritamarie Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43220	M 1 0	D 2 0	Y 0 9	Amount 200.00	
Full Name of Contributor Tim Rankin					Registration Number, if PAC		
Street Address 266 N. Fourth Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43215	M 1 0	D 2 0	Y 0 9	Amount 100.00	
Full Name of Contributor Leslie Heath					Registration Number, if PAC		
Street Address 2035 Tremont Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43221	M 1 0	D 2 0	Y 0 9	Amount 200.00	
Full Name of Contributor Brad Anderson					Registration Number, if PAC		
Street Address 1981 Tremont Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43212	M 1 0	D 2 0	Y 0 9	Amount 250.00	
Full Name of Contributor Helena Anderson					Registration Number, if PAC		
Street Address 1981 Tremont Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43212	M 1 0	D 2 0	Y 0 9	Amount 250.00	
Full Name of Contributor Joseph Berwanger					Registration Number, if PAC		
Street Address 1600 Sundridge Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43221	M 1 0	D 2 0	Y 0 9	Amount 250.00	
Full Name of Contributor Jeffrey Bibbo					Registration Number, if PAC		
Street Address 2091 Yorkshire Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43221	M 1 1	D 0 4	Y 0 9	Amount 50.00	
Full Name of Contributor Maria Mone					Registration Number, if PAC		
Street Address 2091 Yorkshire Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43221	M 1 1	D 0 4	Y 0 9	Amount 150.00	

* 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)]

Page Total \$ 1,450.00