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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full									
Citizens for David DeCapua				ID a	ion Ni	or (CDA			
Full Name of Contributor				Registra	tion Numb	ei, ii rA			
Daniel McCormick							Town (Cook Ch	ools ota	
Street Address	Employe	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
3800 Ritamarie Drive						×7	check Amount	эндматэмпасиями энтегнатичной (4) г	
City	Sta	ite H	Zip Code	M	D	Y	Ашоци	200.00	
Columbus	10	l l	43220	1 0	2 0 tion Numb	0 9	C	200.00	
Full Name of Contributor				Kegisira	non munn	ei, ii PA	C		
Tim Rankin		····	The second secon				Earn (Coch Ch	nok ata	
Street Address	Employe	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
266 N. Fourth Street		umoumuminti***				77	check		
City	Sta		Zip Code	M	D	Y	Amount	100.00	
Columbus		H	43215	10	20	0 9	C	100.00	
Full Name of Contributor				Kegistra	tion Numl	oer, ii PA	C		
Leslie Heath		MARKET CONTRACTOR					Form (Cash, Cl	1	
Street Address	Employe	r/Occupa	tion/Labor Organization*					ieck, etc.)	
2035 Tremont Road	***************************************		Sections and residence and res		T		check		
City	Sta		Zip Code	M	D	Y	Amount	200 00	
Columbus		H	43221	110		0 9		200.00	
Full Name of Contributor				Registra	tion Num	oer, if PA	.C		
Brad Anderson							E (C1- C)	1	
Street Address	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, et			теск, етс.)	
1981 Tremont Road					T	7 7	check	account of the second of the s	
City	St	ate	Zip Code	М	D	Y	Amount	250.00	
Columbus		H	43212	1 0		0 9	<u></u>	250.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	i.C		
Helena Anderson		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~							
Street Address	Employe	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
1981 Tremont Road			ngoveroscomoweroscomowoodonoscomowoodonoscomowoodonoscomowoodonoscomowoodonoscomowoodonoscomowoodonoscomowodon			*	check		
City		ate	Zip Code	M	D	Y	Amount	050.00	
Columbus		H	43212	1 0				250.00	
Full Name of Contributor				Registra	ition Num	ber, if PA	ıC		
Joseph Berwanger	**************************************								
Street Address	Employe	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
1600 Sundridge Drive		*******************				equamento anterior	check	equalization of the second	
City		ate	Zip Code	M	D	Y	Amount	000.00	
Columbus		H	43221		2 0			250.00	
Full Name of Contributor				Registra	ition Num	ber, if PA	4C		
Jeffrey Bibbo						70. N. S. C. S			
Street Address	Employe	Employer/Occupation/Labor Organization*						heck, etc.)	
2091 Yorkshire Road		la avec de la manuscomo construction		name of the second seco		on front was the same of the s	check		
City	Si	ate	Zip Code	М	D	Y	Amount	ma aa	
Columbus		H	43221	1 1	0 4	0 9		50.00	
Full Name of Contributor				Registr	ation Nur	ber, if PA	AC .		
Maria Mone									
Street Address	Employe	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
2091 Yorkshire Road					engeres and some great and	melinen managaran and a	check	**************************************	
City	Si	ate	Zip Code	M	D	Y	Amount	as been all and a	
Columbus	0	H	43221	1 1	0 4	0 9		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