31-A
R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full: Citizens Committee for Persons with D.D.

Full Name of Contributor	Registration Number if PAC	Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	City	State	Zip Code	M	D	Y	Amount
Christine J Andrews		4537 Clayburn Drive W	N/A	check	Grove City	OH	43123	04	15	11	340.00
Susan L Boggs		P.O. Box 234	N/A	check	Commercial Point	OH	43116	04	10	11	76.00
Abby Moran		8084 Ramey Crossing Dr	N/A	check	Blacklick	OH	43004	04	11	11	33.00
Living Skills Center		4200 Bixby Road	N/A	check	Groveport	OH	43125	03	16	11	200.00
Living Skills Center		4200 Bixby Road	N/A	check	Groveport	OH	43125	03	16	11	625.00

* 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 $ 1,274.00