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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Citizens for Demro								
Full Name of Contributor				Registra	tion Nun	ber, if PA	C	
Noah Hampton				<u></u>				
Street Address	Employer/0	Оссира	tion/Labor Organization*				Form (Cash, Chec	k, etc.)
28208 Jewell Road							Online	
City	State	;	Zip Code	M	D	Y	Amount	
Gahanna	0	Η_	43230	017	2 5	1 3		34.00
Full Name of Contributor				Registra	tion Nun	ber, if PA	.C	
Patrick Moran								
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Chec	k, etc.)		
1189 Virginia Avenue							Online	
City	State	:	Zip Code	М	D	Y	Amount	
Lakewood	lol	Н	44107	0 7	215	1 3		50.00
Full Name of Contributor	<u> </u>					ber, if PA	.C	
Vito Alvarez				1				
Street Address	Employer/6	Эссира	tion/Labor Organization*	-			Form (Cash, Chec	k, etc.)
38202 Avalon Drive		·	•				Online	
City	State	,	Zip Code	Тм	D	Ϋ́	Amount	
N. Ridgeville	lol	Н	44039	017	215	$\lfloor 1 \lfloor 3 \rfloor$		34.00
Full Name of Contributor	U		11007				C	01.00
Full Name of Contributor Registration Number, if PAC Dottie Buckon								
Street Address	Employer/0	Decuna:	tion/Labor Organization*				Form (Cash, Chec	k etc.)
1245 Chase Avenue	Linployen	Scoupe	arous Button Organization				Check	
City	State	;	Zip Code	М	D	Y	Amount	
l *		H.	44107	0 7	I .		runount	34.00
Lakewood Full Name of Contributor	101		4410/				<u> </u>	34.00
Lisa Metro Street Address	E1/	``	tion (I abov O i ti ni	<u> </u>			Francisco Charles	de ata)
11 12	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
2024 Wyandotte Avenue			le: 0 1	T		T 1/	Check	
City	State		Zip Code	M	D	Y	Amount	5 0.00
Lakewood	<u> 101</u>	Н	44107	0 8	10		<u></u>	50.00
Full Name of Contributor Registration Number, if PAC								
Markling for Lakewood Schools								
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
1542 Belle Avenue	ļ					· · · · · · · · · · · · · · · · · · ·	Check	
City	State		Zip Code	M	D	Y	Amount	
Lakewood	0	Н	44107			1 3		250.00
Full Name of Contributor				Registra	tion Nun	iber, if PA	.C	
Abby & Francisco Rivera								
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Chec	ck, etc.)			
524 Stedway Court							Check	
City	State		Zip Code	M	D	Y.	Amount	
Gahanna	0	Н	43230	0 8	3 <u>1</u> 0		-	15.00
Full Name of Contributor Registration Number, if PAC								
Dick & Pam Debevoise								
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)				
536 Haversham Drive				Check				
City	State		Zip Code	М	D	Y	Amount	
Gahanna	0	Н	43230	0 8	3 0	1 3		25.00

* 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 \$	492.00