

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Anne Gonzales									
Full Name of Contributor David Bianconi							Registration Number, if PAC		
Street Address 7825 Red Bank Road				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville		State OH		Zip Code 43082		M 0		D 5	
						Y 1		Amount 1,000.00	
Full Name of Contributor Robert Woodruff							Registration Number, if PAC		
Street Address 671 Kienle Avenue				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Westerville		State OH		Zip Code 43081		M 0		D 5	
						Y 2		Amount 25.00	
Full Name of Contributor Eric Dodds							Registration Number, if PAC		
Street Address 186 Monroe Lane				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Westerville		State OH		Zip Code 43081		M 0		D 5	
						Y 2		Amount 25.00	
Full Name of Contributor Albert Anderson							Registration Number, if PAC		
Street Address 227 Storington Road				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Westerville		State OH		Zip Code 43081		M 0		D 5	
						Y 2		Amount 25.00	
Full Name of Contributor James McLeaster							Registration Number, if PAC		
Street Address 1188 Forest Rise Drive				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Westerville		State OH		Zip Code 43081		M 0		D 5	
						Y 2		Amount 20.00	
Full Name of Contributor Henry Yates							Registration Number, if PAC		
Street Address 665 E. Walnut Street				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Westerville		State OH		Zip Code 43081		M 0		D 5	
						Y 2		Amount 50.00	
Full Name of Contributor Mary Jane Priest							Registration Number, if PAC		
Street Address 155 Franklin Avenue				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Westerville		State OH		Zip Code 43081		M 0		D 5	
						Y 2		Amount 25.00	
Full Name of Contributor Robert J. Behal							Registration Number, if PAC		
Street Address 501 S. High Street				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus		State OH		Zip Code 43215		M 0		D 5	
						Y 2		Amount 250.00	

* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total \$1,420.00