

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>Citizens For Southwestern City Schools</u>									
Full Name of Contributor <u>Leah Walter</u>						Registration Number, if PAC			
Street Address <u>437 Piedmont Rd.</u>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>Check</u>		
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43214</u>	M <u>0</u>	D <u>3</u>	Y <u>20</u>	Y <u>09</u>	Amount <u>\$5.00</u>		
Full Name of Contributor <u>Barry Alcock</u>						Registration Number, if PAC			
Street Address <u>5085 Bixby Rd.</u>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>Check</u>		
City <u>Groveport</u>	State <u>OH</u>	Zip Code <u>43125</u>	M <u>0</u>	D <u>3</u>	Y <u>20</u>	Y <u>09</u>	Amount <u>\$5.00</u>		
Full Name of Contributor <u>Mark Raines & Maria Thompson</u>						Registration Number, if PAC			
Street Address <u>3392 Gateway Lakes Dr.</u>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>Check</u>		
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	M <u>0</u>	D <u>3</u>	Y <u>20</u>	Y <u>09</u>	Amount <u>\$5.00</u>		
Full Name of Contributor <u>Nicole Wissman</u>						Registration Number, if PAC			
Street Address <u>3439 Tupelo St</u>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>Check</u>		
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	M <u>0</u>	D <u>3</u>	Y <u>20</u>	Y <u>09</u>	Amount <u>\$5.00</u>		
Full Name of Contributor <u>Marolyn Cook</u>						Registration Number, if PAC			
Street Address <u>PO Box 28223</u>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>Check</u>		
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43228</u>	M <u>0</u>	D <u>3</u>	Y <u>20</u>	Y <u>09</u>	Amount <u>\$5.00</u>		
Full Name of Contributor <u>R. Pettis</u>						Registration Number, if PAC			
Street Address <u>3425 Crandon St.</u>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>Check</u>		
City <u>Hilliard</u>	State <u>OH</u>	Zip Code <u>43026</u>	M <u>0</u>	D <u>3</u>	Y <u>20</u>	Y <u>09</u>	Amount <u>\$5.00</u>		
Full Name of Contributor <u>Amy Lynn Wallenfelsz</u>						Registration Number, if PAC			
Street Address <u>2396 Ziner Circle N</u>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>Check</u>		
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	M <u>0</u>	D <u>3</u>	Y <u>20</u>	Y <u>09</u>	Amount <u>\$10.00</u>		
Full Name of Contributor <u>Veronica McGuire</u>						Registration Number, if PAC			
Street Address <u>278 North Cassady Rd</u>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>Check</u>		
City <u>Bexley</u>	State <u>OH</u>	Zip Code <u>43209</u>	M <u>0</u>	D <u>3</u>	Y <u>20</u>	Y <u>09</u>	Amount <u>\$5.00</u>		

* 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)]