31-A
R.C. 3517.10

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full						
Citizens for Quality Schools						
Full Name of Contributor					Registration Number, if PAC	
Todd Kuck						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
1017 Rutland Way						check
City	State	Zip Code	M	D	Y	Amount
Worthington	OH	43085	09	29	10	100.00
Full Name of Contributor					Registration Number, if PAC	
Diane Ballard						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
365 Invicta Place						check
City	State	Zip Code	M	D	Y	Amount
Gahanna	OH	43230	09	29	10	100.00
Full Name of Contributor					Registration Number, if PAC	
Michelle Henry						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
1203 Tannic Street						check
City	State	Zip Code	M	D	Y	Amount
Blacklick	OH	43004	09	29	10	50.00
Full Name of Contributor					Registration Number, if PAC	
Eric Vass						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
6917 Cooper Rd						check
City	State	Zip Code	M	D	Y	Amount
Westerville	OH	43081	09	29	10	50.00
Full Name of Contributor					Registration Number, if PAC	
Ashley Hamilton						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
6381 Tattler Rd						check
City	State	Zip Code	M	D	Y	Amount
Columbus	OH	43230	09	29	10	40.00
Full Name of Contributor					Registration Number, if PAC	
Katharine Lewicki						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
6421 Upper Lake Cir						check
City	State	Zip Code	M	D	Y	Amount
Westerville	OH	43081	09	29	10	60.00
Full Name of Contributor					Registration Number, if PAC	
Dianne Heinmiller						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
1001 Sugar Hill Place						check
City	State	Zip Code	M	D	Y	Amount
Gahanna	OH	43230	09	29	10	70.00
Full Name of Contributor					Registration Number, if PAC	
Lisa Grooms						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
1275 Jensen Park Drive						check
City	State	Zip Code	M	D	Y	Amount
New Albany	OH	43054	09	29	10	30.00

* 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 $ 500.00