31-A
R.C. 3517.10

Page 6

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	
Elizabeth Spieth						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
357 Kanawha						check
City	State	Zip Code	M	D	Y	Amount
Lancaster	O | H	43230	0 9	1 7	1 0	150.00
Full Name of Contributor					Registration Number, if PAC	
Susan Owens						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
399 Middleground Rd. SW						check
City	State	Zip Code	M	D	Y	Amount
Pataskala	O | H	43062	0 9	1 7	1 0	43.00
Full Name of Contributor					Registration Number, if PAC	
Nancy Clark						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
4222 Berry Ridge Ln						check
City	State	Zip Code	M	D	Y	Amount
Gahanna	O | H	43230	0 9	1 7	1 0	50.00
Full Name of Contributor					Registration Number, if PAC	
Kristen Groves						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
7507 Ashley Meadow Dr						check
City	State	Zip Code	M	D	Y	Amount
Blacklick	O | H	43004	0 9	1 7	1 0	500.00
Full Name of Contributor					Registration Number, if PAC	
Kristy Flynn						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
1264 Ashburnham Dr						check
City	State	Zip Code	M	D	Y	Amount
Gahanna	O | H	43230	0 9	1 7	1 0	125.00
Full Name of Contributor					Registration Number, if PAC	
Bryan Hicks						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
5584 Henselwoods Dr						check
City	State	Zip Code	M	D	Y	Amount
Gahanna	O | H	43230	0 9	1 7	1 0	85.00
Full Name of Contributor					Registration Number, if PAC	
Julie Baldwin						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
765 Autumn Ash Court						check
City	State	Zip Code	M	D	Y	Amount
Gahanna	O | H	43230	0 9	1 7	1 0	50.00
Full Name of Contributor					Registration Number, if PAC	
Carolyn Frissora						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
520 Preservation Lane						check
City	State	Zip Code	M	D	Y	Amount
Gahanna	O | H	43230	0 9	1 7	1 0	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 $ 1,033.00