Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full		·		·
Citizens for UA Schools				
Full Name of Contributor Kevin A. Gorman			Registration Number, if	PAC
Street Address	Employer/Occu	apation/Labor Organization*		Form (Cash, Check, etc.)
4973 Golf Village Drive	Employen occu	pation Labor Organization		Check
City Powell	State OH	Zip Code 43065	0 8 0 5 1 2	Amount \$100.00
Full Name of Contributor Peter Kourlas			Registration Number, if	PAC
Street Address	[F]. (O	· -π -1 Δ · *		Form (Cash, Check, etc.)
4649 Barrymede Court	Employer/Occu	Employer/Occupation/Labor Organization		Check
City Upper Arlington	State OH	Zip Code 43220	0 8 0 5 1 2	Amount \$25.00
Full Name of Contributor Scott Bertke			Registration Number, if PAC	
Street Address 224 Woodland Drive	Employer/Occu	upation/Labor Organization*	•	Form (Cash, Check, etc.) Check
City Powell	Staite OH	Zip Code 43065	0 8 0 6 1 2	Amount \$100.00
Ill Name of Contributor Kevin Fix			Registration Number, if	PAC
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
1858 Arlington Avenue		- 1	······································	Check
City Columbus	State OH	Zip Code 43212	0 8 0 6 1 2	Amount \$50.00
Full Name of Contributor James Carnes	1,,,		Registration Number, if	PAC
Street Address	Employer/Occu	ipation/Labor Organization*	<u></u>	Form (Cash, Check, etc.)
2446 Wimbledon Road				Check
City Columbus	State OH	Zip Code 43220	$0^{\mathrm{M}} 8 \left 0^{\mathrm{D}} 6 \right 1^{\mathrm{Y}} 2$	Amount \$75.00
Full Name of Contributor Steven Phillips	***		Registration Number, if	PAC
Street Address 4296 Dublin Road	Employer/Occur	pation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43221	M D Y Y 0 8 1 2	Amount \$150.00
Full Name of Contributor Schindler & Associates			Registration Number, if	PAC
Street Address 3380 Tremont Road	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Columbus	Stare OH	Zip Code 43221	0 8 0 6 1 2	Amount \$50.00
Full Name of Contributor Chris Collaros			Registration Number, if	PAC
Street Address 6813 Alloway Street East	Employer/Occur	pation/Labor Organization*		Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085	M D Y 1 2	Amount 2 \$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 also appear. [R.C. 3517.10(B)(4)]