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Statement of Contributions Received

Prescribed by Secretary of State 3/05

	WINDAMOON AS AND COMMON AND AND COMMON AND C					energy and the second s		and the second second	
Name of Committee in Full									
Citizens for Quality Schools									
Full Name of Contributor				Registration Number, if PAC					
Rhonda Bishop	Employer/Occupation/Labor Organization*								
Street Address	Employe				Form (Cash, Check, etc.)				
1062 Eberton Ave					check				
^{City} Blacklick	O	ate H	Zip Code 430004	$\begin{bmatrix} M \\ 0 \end{bmatrix} 3$	$\begin{vmatrix} D \\ 0 \end{vmatrix} 2$	$egin{bmatrix} \mathbf{Y} \\ 1 & 0 \end{bmatrix}$	Amount	82.00	
Full Name of Contributor		a Committee de La Servicio de Completo		Registra	ition Nun	nber, if P	4C		
Lita Armstrong									
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Che	ck, etc.)	
1006 Sugar Hill Place							check		
City	Sta		Zip Code	M	D	Y	Amount		
Gahanna	0	Н	43230	0 3	THE PERSON NAMED IN COLUMN		fire and the second	85.00	
Full Name of Contributor				Registra	tion Nur	nber, if Pa	AC		
Susan Domini						****			
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Che	ck, etc.)	
840 Valley Forge Ct					check				
City	I	ate	Zip Code	М	D	Y	Amount		
Westerville	0	Н	43082	0 3		1 0		25.00	
Full Name of Contributor				Registra	ation Nur	nber, if Pa	AC		
Janet Griffin						22	\$70.000.000.000.000.000.000.000.000.000.		
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
2727 Colts Neck Rd					···	·	check	·····	
City	1	ate	Zip Code	М	D	Y	Amount		
Blacklick	0	Н	43004	0 3		1 0		50.00	
Full Name of Contributor				Registra	ation Nur	nber, if P.	AC		
Rachel Coldwell				L		alemanie in			
Street Address	Employe	Employer/Occupation/Labor Organization*					Form (Cash, Che	ck, etc.)	
4905 Strand Rd						·	check		
City	St	ate	Zip Code	M	D	Y	Amount		
Westerville	<u> </u>	Н	43082	0 3	TO AND DESCRIPTION OF THE PERSON OF THE PERS			80.00	
Full Name of Contributor				Registra	ation Nur	nber, if P.	AC		
Danielle Blanke					and the same of th			necessaria de la compansión de la compan	
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)		
70 N Hempstead Rd						~~~~~	check		
City	1 _	ate	Zip Code	M	D	Y	Amount		
Westerville	0	Н	43082	0 3		minorementarione		40.00	
Full Name of Contributor				Registra	ation Nu	nber, if P	AC		
Erin Hoover			***************************************		in one of the contract of			***************************************	
Street Address	Employer/Occupation/Labor Organization*				1			ck, etc.)	
614 S Grant Ave			w _w		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	check		
City	St	ate	Zip Code	M	D	Y	Amount		
Columbus	l O	Н	43206	0 3			The contraction of the contracti	52.00	
Full Name of Contributor				Registra	ation Nu	nber, if P	AC		
Jenifer Judy					gundanê maganên				
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Che	eck, etc.)		
2960 Mondavi						check			
City	St	ate	Zip Code	M	D	Y	Amount		
Hilliard	O	Н	43026	0 3	0 2	1 0		35.00	

* 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 \$ 449.00