

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens For Southwestern City Schools									
Full Name of Contributor South-Western Education Association						Registration Number, if PAC			
Street Address 4074 Hoover Rd Ste 201			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Grove City			State OH	Zip Code 43123		M D Y 09 15 09		Amount \$ 3000.-	
Full Name of Contributor CCHS Athletic Boosters Association						Registration Number, if PAC			
Street Address 2067 Gingerwood Ct			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Grove City			State OH	Zip Code 43123		M D Y 09 21 09		Amount \$ 1000.-	
Full Name of Contributor David & Kathleen Bright						Registration Number, if PAC			
Street Address 2916 Buxton Lane			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Grove City			State OH	Zip Code 43123		M D Y 09 14 09		Amount \$ 250.-	
Full Name of Contributor Thomas or Julie Willison						Registration Number, if PAC			
Street Address 2417 Ziner Circle N			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Grove City			State OH	Zip Code 43123		M D Y 1 00 4 09		Amount 60.-	
Full Name of Contributor Barbara Pringle						Registration Number, if PAC			
Street Address 3028 Woodgrove Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Grove City			State OH	Zip Code 43123		M D Y 10 04 09		Amount 50.-	
Full Name of Contributor David & Jody Burris						Registration Number, if PAC			
Street Address 4375 Shirlene Court			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Grove City			State OH	Zip Code 43123		M D Y 09 29 09		Amount 100.-	
Full Name of Contributor Ryan & Melissa Alexander						Registration Number, if PAC			
Street Address 4629 Hunting Creek Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Grove City			State OH	Zip Code 43123		M D Y 10 04 09		Amount 50.-	
Full Name of Contributor Joseph & Kathleen Clark						Registration Number, if PAC			
Street Address 2769 Buxton Ln			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Grove City			State OH	Zip Code 43123		M D Y 10 04 09		Amount 75.-	

* 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)]