

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for UA Schools						
Full Name of Contributor Greensview PTO				Registration Number, if PAC		
Street Address 4301 Greensview Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 2	Amount \$100.00
Full Name of Contributor Betsy Sidor				Registration Number, if PAC		
Street Address 7625 Oakhurst Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43235	M 1	D 0	Y 2	Amount \$25.00
Full Name of Contributor Michael Schaefer				Registration Number, if PAC		
Street Address 2995 Wellesley Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43221	M 1	D 0	Y 2	Amount \$6.50
Full Name of Contributor MaryAnne Nyeste				Registration Number, if PAC		
Street Address 1169 Airendel Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43220	M 1	D 0	Y 2	Amount \$100.00
Full Name of Contributor Jeffrey Hiller				Registration Number, if PAC		
Street Address 4770 Clarion Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 1	D 0	Y 2	Amount \$50.00
Full Name of Contributor Burbank Early Childhood PTO				Registration Number, if PAC		
Street Address 1814 Andover Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43212	M 1	D 0	Y 2	Amount \$100.00
Full Name of Contributor Nicole McCarthy				Registration Number, if PAC		
Street Address 4355 Shelbourne Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 1	D 0	Y 2	Amount \$50.00
Full Name of Contributor Jake Will				Registration Number, if PAC		
Street Address 2614 Edington Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 1	D 0	Y 2	Amount \$100.00

* 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)]