

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Quality Schools						
Full Name of Contributor Roben Frentzel				Registration Number, if PAC		
Street Address 860 Aries Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State OH	Zip Code 43230	M 0	D 9	Y 2	Amount \$100.00
Full Name of Contributor David and Jennifer Palguta				Registration Number, if PAC		
Street Address 2687 Northmont Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State OH	Zip Code 43004	M 0	D 9	Y 2	Amount \$50.00
Full Name of Contributor Terri J Koozer				Registration Number, if PAC		
Street Address 1110 Lori Ln.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Westerville	State OH	Zip Code 43081	M 0	D 9	Y 2	Amount \$25.00
Full Name of Contributor Lisa Grooms				Registration Number, if PAC		
Street Address 7679 Blacklick Ridge Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State OH	Zip Code 43004	M 0	D 9	Y 2	Amount \$20.00
Full Name of Contributor Ashley Tucker				Registration Number, if PAC		
Street Address 225 Brookhill Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State OH	Zip Code 43230	M 0	D 9	Y 3	Amount \$25.00
Full Name of Contributor Living in Family Environments, Inc.				Registration Number, if PAC		
Street Address 142 N. High St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State OH	Zip Code 43230	M 0	D 9	Y 3	Amount \$500.00
Full Name of Contributor Cardinal Bus Sales & Service, Inc.				Registration Number, if PAC		
Street Address 6280 Harding Highway St. Rt. 309		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Lima	State OH	Zip Code 45801	M 0	D 9	Y 3	Amount \$50.00
Full Name of Contributor Scott, Scriven & Wahoff, LLP				Registration Number, if PAC		
Street Address 250 E. Broad St. Suite 900		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 0	Amount \$1,000.00

* 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)]

Page Total **\$1,770.00**