

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 John & Lisa Dubos						Registration Number, if PAC			
Street Address 1048 Pinnacle Club Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 0	D 7	Y 2	Y 0	Y 9	Amount 225.-	
Full Name of Contributor John Morrow						Registration Number, if PAC			
Street Address 3634 Christopher PL			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 0	D 7	Y 2	Y 0	Y 9	Amount 200.-	
Full Name of Contributor Randall & Peggy Mosher						Registration Number, if PAC			
Street Address 1118 Carnoustie Circle			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 0	D 7	Y 2	Y 0	Y 9	Amount 200.-	
Full Name of Contributor Burges & Burges Strategists INC						Registration Number, if PAC			
Street Address 26100 Lake Shore Blvd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Euclid	State OH	Zip Code 44132	M 0	D 7	Y 2	Y 1	Y 0	Amount 1000.-	
Full Name of Contributor Stringtown Rd Dairy Queen LLC						Registration Number, if PAC			
Street Address 1779 Stringtown Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 0	D 7	Y 2	Y 3	Y 0	Amount 72.48	
Full Name of Contributor Zoraba Ross						Registration Number, if PAC			
Street Address 1822 Fairhaven. Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43229	M 0	D 7	Y 3	Y 0	Y 0	Amount 50.-	
Full Name of Contributor Garverick's INC						Registration Number, if PAC			
Street Address 1910 Stringtown Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 0	D 7	Y 2	Y 4	Y 0	Amount 150.-	
Full Name of Contributor Margie's Cove						Registration Number, if PAC			
Street Address 495 S. High Street, Ste 150			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 0	D 8	Y 0	Y 4	Y 0	Amount 1000.-	

* 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)]