

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 Karen & Daniel New						Registration Number, if PAC	
Street Address 6166 Winnebago St			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Grove City		State OH	Zip Code 43123		M 0	D 8	Y 0
Amount 35.-							
Full Name of Contributor Drenda Kemp						Registration Number, if PAC	
Street Address 707 S Sylvan Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus		State OH	Zip Code 43204		M 0	D 8	Y 0
Amount 25.-							
Full Name of Contributor Michele Harkins						Registration Number, if PAC	
Street Address 6121 Wexford Park Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43228		M 0	D 8	Y 0
Amount 50.-							
Full Name of Contributor David & Bonita Mitchcock						Registration Number, if PAC	
Street Address 2269 Hillswood Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Grove City		State OH	Zip Code 43123		M 0	D 8	Y 0
Amount 35.-							
Full Name of Contributor Scott Molino & Mandy Thompson						Registration Number, if PAC	
Street Address 460 Hibbs Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Lockbourne		State OH	Zip Code 43137		M 0	D 8	Y 0
Amount 70.-							
Full Name of Contributor J Patrick & Mary Ann Callaghan						Registration Number, if PAC	
Street Address 4634 Oracle Lane			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Hilliard		State OH	Zip Code 43026		M 0	D 8	Y 0
Amount 15.-							
Full Name of Contributor Jill & Timothy Burke						Registration Number, if PAC	
Street Address 4643 Barnwood Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Grove City		State OH	Zip Code 43123		M 0	D 8	Y 0
Amount 70.-							
Full Name of Contributor Kenneth Stammen & Kelli Milligan-Stammen						Registration Number, if PAC	
Street Address 2392 Kittred Ct			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Grove City		State OH	Zip Code 43123		M 0	D 8	Y 0
Amount 10.-							

* 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. 0(B)(4)]

310

Page Total \$0.00