

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>Citizens For Southwestern City Schools</i>											
Full Name of Contributor <i>D. Greg Gack + Patricia Gack</i>						Registration Number, if PAC					
Street Address <i>158 Chestnut Estates Dr.</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>Check</i>				
City <i>Commercial Point</i>			State <i>OH</i>		Zip Code <i>43116</i>		M <i>03</i>		D <i>20</i>	Y <i>09</i>	Amount <i>\$5.00</i>
Full Name of Contributor <i>Todd + Karen Hurley</i>						Registration Number, if PAC					
Street Address <i>4704 Teabury Square S.</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>Check</i>				
City <i>Grove City</i>			State <i>OH</i>		Zip Code <i>43123</i>		M <i>03</i>		D <i>23</i>	Y <i>09</i>	Amount <i>\$5.00</i>
Full Name of Contributor <i>Jennifer Zelei</i>						Registration Number, if PAC					
Street Address <i>2014 Farmbrook Circle</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>Check</i>				
City <i>Grove City</i>			State <i>OH</i>		Zip Code <i>43123</i>		M <i>03</i>		D <i>20</i>	Y <i>09</i>	Amount <i>\$5.00</i>
Full Name of Contributor <i>Diana Mary Tischer</i>						Registration Number, if PAC					
Street Address <i>960 Thornapple Grove</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>Check</i>				
City <i>Galloway</i>			State <i>OH</i>		Zip Code <i>43119</i>		M <i>03</i>		D <i>20</i>	Y <i>09</i>	Amount <i>\$5.00</i>
Full Name of Contributor <i>James Davis</i>						Registration Number, if PAC					
Street Address <i>778 Clayton Bend Dr.</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>Check</i>				
City <i>Galloway</i>			State <i>OH</i>		Zip Code <i>43119</i>		M <i>03</i>		D <i>24</i>	Y <i>09</i>	Amount <i>\$5.00</i>
Full Name of Contributor <i>Jeffrey + Brieanne Jones</i>						Registration Number, if PAC					
Street Address <i>4496 Edgerton Drive</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>				
City <i>Grove City</i>			State <i>OH</i>		Zip Code <i>43123</i>		M <i>03</i>		D <i>25</i>	Y <i>09</i>	Amount <i>\$5.00</i>
Full Name of Contributor <i>Emily Moler</i>						Registration Number, if PAC					
Street Address <i>1841 Hobbes Dr</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>Check</i>				
City <i>Hilliard</i>			State <i>OH</i>		Zip Code <i>43026</i>		M <i>03</i>		D <i>23</i>	Y <i>09</i>	Amount <i>\$5.00</i>
Full Name of Contributor <i>Scott + Vicki Burlingame</i>						Registration Number, if PAC					
Street Address <i>2325 Topaz Dr</i>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <i>check</i>				
City <i>Grove City</i>			State <i>OH</i>		Zip Code <i>43123</i>		M <i>03</i>		D <i>25</i>	Y <i>09</i>	Amount <i>\$5.00</i>

* 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 \$0.00

40.00