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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full				***************************************		00000000000000000000000000000000000000		
Citizens for Quality Schools								
Full Name of Contributor				Registra	tion Num	ber, if PA	۱C	***************************************
Regina Fredrick James Street Address	Employe	r/Occup	ation/Labor Organization*	l			Form (Cash, Che	ck, etc.)
722 Hunters Run	Zimpio) C	no occup.	40012 24001 01Bannan				СС	
City	St	ate	Zip Code	T M	D	Y	Amount	
	10	Н	43230	0 4	0 6	1		5.00
Gahanna Full Name of Contributor			40200		tion Num	-	AC	J.00
Lorainne Sapp								
Street Address	Employe	er/Occup	ation/Labor Organization*	_	************	and the second second	Form (Cash, Che	ck, etc.)
861 Ridenour	Lampies,						СС	
City	St	ate	Zip Code	М	D	Y	Amount	
Gahanna	0	Н	43230	0 4	0 6	1 0		5.00
Full Name of Contributor		l	1 10200	and announced to the contract	tion Nur	al-ministration and a second a	AC	***************************************
Marjorie Wachowiak								
Street Address	Employe	er/Occup	ation/Labor Organization*	L			Form (Cash, Che	ck, etc.)
957 Asvir Crt							сс	
City	St	ate	Zip Code	M	l D	Y	Amount	
Gahanna	0	Н	43230	0 4	0 5	1 0		5.00
Full Name of Contributor			10200		ation Nun		AC	00000000000000000000000000000000000000
Jennifer Richardson								
Street Address	Employer/Occupation/Labor Organization* Fo			Form (Cash, Che	eck, etc.)			
3834 Mann Rd		,	·				СС	
City	Si	ate	Zip Code	М	D	Y	Amount	
Blacklick	0	Н	43004	0 4	0 5	1 0		5.00
Full Name of Contributor		- Humanine and and	10001		ation Nun		THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER, THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	Charles on Management of the
Valerie Hawley								
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)				
1761 Taylor Corners ct		•	<u> </u>				СС	
City	S	ate	Zip Code	M	D	Y	Amount	
Blacklick	0	H	43004	0 4	0 5	10		5.00
Full Name of Contributor			1 10001		ation Nur	TAXABLE PARTY OF	Contraction of the second	
Julie Webber				000				
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)					
1669 Fox Chase			cc					
City	S	tate	Zip Code	M	D	Y	Amount	
Gahanna	0	Н	43230	0 4	0 5	1 0		10.00
Full Name of Contributor			10400	A STATE OF THE PARTY OF THE PAR	ation Nur	The second second		
Maria Raguindin								
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)					
7571 Dover Ridge St				СС				
City	S	tate	Zip Code	M	D	Y	Amount	
Blacklick	l o i	Н	43004	0 4		1	1	10.00
Full Name of Contributor			1.0001		ation Nu	Continues of the last of the l	- Company of the Comp	
Lori Perry				1		,		
Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)					
8612 Swisher Creek Crossing	Simple Join Companies Bases of Ballinanies		CC					
		tate	Zip Code	М	D	ΤY	Amount	·····
City Nov. Albany	l o °	H	43054	0 4	1 .	10		5.00
New Albany	annessaria de la compania del la compania de la compania de la compania del la compania de la compania de la compania del la compania de la compania de la compania del la compania d		THE OPENING WAS ASSESSED.	and the same of th				KKKE SANGON

Page Tot	al \$	50.00

^{*} 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 appear. [R.C. 3517.10(B)(4)]