

## Statement of Contributions Received

Prescribed by Secretary of State 03/05

|                                                                                   |                    |                                         |               |                                          |                |                       |  |
|-----------------------------------------------------------------------------------|--------------------|-----------------------------------------|---------------|------------------------------------------|----------------|-----------------------|--|
| Name of Committee in Full<br><i>Citizens For Southwestern City Schools</i>        |                    |                                         |               |                                          |                |                       |  |
| Full Name of Contributor<br><i>Sam &amp; Lisa Stump</i>                           |                    |                                         |               | Registration Number, if PAC              |                |                       |  |
| Street Address<br><i>2388 Milligan Grove</i>                                      |                    | Employer/Occupation/Labor Organization* |               | Form (Cash, Check, etc.)<br><i>Check</i> |                |                       |  |
| City<br><i>Grove City</i>                                                         | State<br><i>OH</i> | Zip Code<br><i>43123</i>                | M<br><i>0</i> | D<br><i>7</i>                            | Y<br><i>22</i> | Amount<br><i>25.-</i> |  |
| Full Name of Contributor<br><i>Rodney &amp; Karen Evans</i>                       |                    |                                         |               | Registration Number, if PAC              |                |                       |  |
| Street Address<br><i>2464 Marthas Wood Ct</i>                                     |                    | Employer/Occupation/Labor Organization* |               | Form (Cash, Check, etc.)<br><i>Check</i> |                |                       |  |
| City<br><i>Grove City</i>                                                         | State<br><i>OH</i> | Zip Code<br><i>43123</i>                | M<br><i>0</i> | D<br><i>7</i>                            | Y<br><i>21</i> | Amount<br><i>25.-</i> |  |
| Full Name of Contributor<br><i>Jane &amp; Tammy French</i>                        |                    |                                         |               | Registration Number, if PAC              |                |                       |  |
| Street Address<br><i>6252 Buckeye Parkway</i>                                     |                    | Employer/Occupation/Labor Organization* |               | Form (Cash, Check, etc.)<br><i>Check</i> |                |                       |  |
| City<br><i>Grove City</i>                                                         | State<br><i>OH</i> | Zip Code<br><i>43123</i>                | M<br><i>0</i> | D<br><i>7</i>                            | Y<br><i>22</i> | Amount<br><i>25.-</i> |  |
| Full Name of Contributor<br><i>Kimberly Worthington-Waits &amp; Gregory Waits</i> |                    |                                         |               | Registration Number, if PAC              |                |                       |  |
| Street Address<br><i>4659 Heatherbend Ct</i>                                      |                    | Employer/Occupation/Labor Organization* |               | Form (Cash, Check, etc.)<br><i>Check</i> |                |                       |  |
| City<br><i>Grove City</i>                                                         | State<br><i>OH</i> | Zip Code<br><i>43123</i>                | M<br><i>0</i> | D<br><i>7</i>                            | Y<br><i>20</i> | Amount<br><i>25.-</i> |  |
| Full Name of Contributor<br><i>Patrick &amp; Julia O'Brien</i>                    |                    |                                         |               | Registration Number, if PAC              |                |                       |  |
| Street Address<br><i>4331 Jeney Pl</i>                                            |                    | Employer/Occupation/Labor Organization* |               | Form (Cash, Check, etc.)<br><i>Check</i> |                |                       |  |
| City<br><i>Grove City</i>                                                         | State<br><i>OH</i> | Zip Code<br><i>43123</i>                | M<br><i>0</i> | D<br><i>7</i>                            | Y<br><i>15</i> | Amount<br><i>25.-</i> |  |
| Full Name of Contributor<br><i>Marcia &amp; Ted Schaefer Jr.</i>                  |                    |                                         |               | Registration Number, if PAC              |                |                       |  |
| Street Address<br><i>3069 Carisbrook Rd</i>                                       |                    | Employer/Occupation/Labor Organization* |               | Form (Cash, Check, etc.)<br><i>Check</i> |                |                       |  |
| City<br><i>Columbus</i>                                                           | State<br><i>OH</i> | Zip Code<br><i>43221</i>                | M<br><i>0</i> | D<br><i>7</i>                            | Y<br><i>20</i> | Amount<br><i>25.-</i> |  |
| Full Name of Contributor<br><i>Lois J. Rapp</i>                                   |                    |                                         |               | Registration Number, if PAC              |                |                       |  |
| Street Address<br><i>1317 Northfield Rd</i>                                       |                    | Employer/Occupation/Labor Organization* |               | Form (Cash, Check, etc.)<br><i>Check</i> |                |                       |  |
| City<br><i>Springfield</i>                                                        | State<br><i>OH</i> | Zip Code<br><i>45502</i>                | M<br><i>0</i> | D<br><i>7</i>                            | Y<br><i>16</i> | Amount<br><i>25.-</i> |  |
| Full Name of Contributor<br><i>Michael &amp; Kimberly Scott</i>                   |                    |                                         |               | Registration Number, if PAC              |                |                       |  |
| Street Address<br><i>4101 Brookgrove Dr</i>                                       |                    | Employer/Occupation/Labor Organization* |               | Form (Cash, Check, etc.)<br><i>Check</i> |                |                       |  |
| City<br><i>Grove City</i>                                                         | State<br><i>OH</i> | Zip Code<br><i>43123</i>                | M<br><i>0</i> | D<br><i>7</i>                            | Y<br><i>21</i> | Amount<br><i>25.-</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)]