

Statement of Contributions Received

Prescribed by Secretary of State 6/3/05

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Name of Committee in Full										
Citizens for Southwestern City Schools										
Full Name of Contributor					Registration Number, if PAC		Form (Cash, Check, etc.)			
Russilli Construction Corp. INC.										
Street Address					Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
5000 Arlington Centre Blvd Ste 300							Check			
City					State		Zip Code		Amount	
Columbus					OH		43220		7500.-	
M					D					Y
08					10					18
Air Quality Solutions										
Street Address					Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
3873 Broadway							Check			
City					State		Zip Code		Amount	
Grove City					OH		43123		500.-	
M					D					Y
08					09					18
Ace Truck & Body										
Street Address					Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
1600 Thrailkill Rd							Check			
City					State		Zip Code		Amount	
Grove City					OH		43123		500.-	
M					D					Y
09					04					18
Hugh Garside										
Street Address					Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
7471 Kuhlwein Rd							Check			
City					State		Zip Code		Amount	
Galloway					OH		43119		500.-	
M					D					Y
08					31					18
Lee Schreiner										
Street Address					Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
4728 Clayburn Dr. E							Check			
City					State		Zip Code		Amount	
Grove City					OH		43123		100.-	
M					D					Y
08					31					18
Brookpark Middle School PTA										
Street Address					Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
2803 Southwest Blvd							Check			
City					State		Zip Code		Amount	
Grove City					OH		43123		500.-	
M					D					Y
08					21					18
David Donofrio										
Street Address					Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
298 Carilla Ln							Check			
City					State		Zip Code		Amount	
Columbus					OH		43228		100.-	
M					D					Y
08					17					18
Rich & Gillis Law Group LLC										
Street Address					Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
6400 Riverside Dr., Ste D							Check			
City					State		Zip Code		Amount	
Dublin					OH		43017		2500.-	
M					D					Y
08					30					18

* 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 \$ _____