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R.C. 3517.10	

## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for UA Schools	<del></del> -				
Full Name of Contributor Barbara Emery			Registration Number, if	PAC	
Street Address 1991 Suffolk Road 3	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	0 9 1 9 1 2	Amount \$50.00	
Full Name of Contributor Upper Arlington Education Association		-	Registration Number, if	PAC	
Street Address 440 W. 2nd Ave.	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43201	0 9 2 0 1 2	Amount \$500.00	
Full Name of Contributor The Thomas-Fenner-Woods Agency	Registration Number, if PAC				
Street Address 1500 Lake Shore Drive, Suite 400	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43204	0 9 2 0 1 2	Amount \$500.00	
Full Name of Contributor  Mary Jo Kiourtsis					
Street Address 4024 Glenda Place	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	0 9 2 0 1 2	Amount \$35.00	
Full Name of Contributor Angela Ullum			Registration Number, if	PAC	
Street Address 5798 Dena Drive	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	0 9 2 3 1 2	Amount \$25.00	
Full Name of Contributor Registration Number, if PAC Theodore Staton					
Street Address 1932 W. 5th Avenue	Employer/Occu	pation/Labor Organization*	•	Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43212	0 9 2 5 1 2	Amount \$50.00	
Full Name of Contributor  Registration Number, if I  Windermere School PTO					
Street Address 4101 Windermere Road	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	Stake OH	Zip Code 43220	M D Y O Y O P O P O P O P O P O P O P O P O	Amount \$100.00	
Full Name of Contributor  Bob Arkin			Registration Number, if	PAC	
Street Address 2131 Cheshire Road	Employer/Occu	pation/Lahor Organization*		Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43221	M D Y O 9 2 6 1 2	Amount \$300.00	

Page Total \$1,560.00

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 also appear. [R.C. 3517.10(B)(4)]