

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full									
Citizens For Southwestern City Schools									
Full Name of Contributor						Registration Number, if PAC			
Andrea & Timothy Barton									
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
6276 Bellow Valley Dr						Check			
City			State	Zip Code		M	D	Y	Amount
Dublin			OH	43016		0	9	3	47.-
Full Name of Contributor						Registration Number, if PAC			
John & Sarah Morgan									
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
1024 Grandon Ave						Check			
City			State	Zip Code		M	D	Y	Amount
Bexley			OH	43209		0	8	3	50.-
Full Name of Contributor						Registration Number, if PAC			
Mary Ellen Cahill									
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
866 Lynnhaven Ct						Check			
City			State	Zip Code		M	D	Y	Amount
Columbus			OH	43228		1	0	0	47.-
Full Name of Contributor						Registration Number, if PAC			
Charles E. Oxley									
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
2727 Dennis Lne						Check			
City			State	Zip Code		M	D	Y	Amount
Grove City			OH	43123		1	0	0	47.-
Full Name of Contributor						Registration Number, if PAC			
H. Fred & Kathy Ruoff									
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
7281 Riverside Dr						Check			
City			State	Zip Code		M	D	Y	Amount
Dublin			OH	43016		1	0	0	100.-
Full Name of Contributor						Registration Number, if PAC			
Neil & Renee Britton									
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
855 Whitehead Dr						Check			
City			State	Zip Code		M	D	Y	Amount
Pataskala			OH	43062		1	0	0	47.-
Full Name of Contributor						Registration Number, if PAC			
Larry & Deanna Lowers									
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
14585 N Old 3C Rd						Check			
City			State	Zip Code		M	D	Y	Amount
Sunbury			OH	43074		1	0	0	50.-
Full Name of Contributor						Registration Number, if PAC			
James Marion									
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
231 Collins Ave						Check			
City			State	Zip Code		M	D	Y	Amount
Columbus			OH	43215		1	0	0	47.-

* 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)]