

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

|                                                                   |                    |                                         |               |               |                                          |                         |  |
|-------------------------------------------------------------------|--------------------|-----------------------------------------|---------------|---------------|------------------------------------------|-------------------------|--|
| Name of Committee in Full<br><b>Citizens for Quality Schools</b>  |                    |                                         |               |               |                                          |                         |  |
| Full Name of Contributor<br><b>Gahanna 05 LLC</b>                 |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address<br><b>82 Granville St</b>                          |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                         |  |
| City<br><b>Gahanna</b>                                            | State<br><b>OH</b> | Zip Code<br><b>43230</b>                | M<br><b>1</b> | D<br><b>0</b> | Y<br><b>2</b>                            | Amount<br><b>75.00</b>  |  |
| Full Name of Contributor<br><b>Rotelli Pizza &amp; Pasta</b>      |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address<br><b>1344 Cherry Bottom Rd.</b>                   |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                         |  |
| City<br><b>Gahanna</b>                                            | State<br><b>OH</b> | Zip Code<br><b>43230</b>                | M<br><b>1</b> | D<br><b>0</b> | Y<br><b>2</b>                            | Amount<br><b>120.32</b> |  |
| Full Name of Contributor<br><b>Quandel</b>                        |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address<br><b>8181 Worthington Road</b>                    |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                         |  |
| City<br><b>Westerville</b>                                        | State<br><b>OH</b> | Zip Code<br><b>43082</b>                | M<br><b>1</b> | D<br><b>1</b> | Y<br><b>5</b>                            | Amount<br><b>500.00</b> |  |
| Full Name of Contributor<br><b>Bellacino's Pizza and Grinders</b> |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address<br><b>4926 Morse Rd</b>                            |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                         |  |
| City<br><b>Gahanna</b>                                            | State<br><b>OH</b> | Zip Code<br><b>43230</b>                | M<br><b>1</b> | D<br><b>1</b> | Y<br><b>5</b>                            | Amount<br><b>31.16</b>  |  |
| Full Name of Contributor                                          |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address                                                    |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)                 |                         |  |
| City                                                              | State              | Zip Code                                | M             | D             | Y                                        | Amount                  |  |
| Full Name of Contributor                                          |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address                                                    |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)                 |                         |  |
| City                                                              | State              | Zip Code                                | M             | D             | Y                                        | Amount                  |  |
| Full Name of Contributor                                          |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address                                                    |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)                 |                         |  |
| City                                                              | State              | Zip Code                                | M             | D             | Y                                        | Amount                  |  |
| Full Name of Contributor                                          |                    |                                         |               |               | Registration Number, if PAC              |                         |  |
| Street Address                                                    |                    | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)                 |                         |  |
| City                                                              | State              | Zip Code                                | M             | D             | Y                                        | Amount                  |  |

\* 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)]

Page Total \$ 726.48