

Statement of Contributions Received

Prescribed by Secretary of State 03/05

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Name of Contributor to Full							
Citizens For Southwestern City Schools							
Full Name of Contributor Kenneth & Kelli Stammen				Registration Number, if PAC			
Street Address 1930 Winter Creek Ct		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check			
City Grove City	State OH	Zip Code 43123	M 0	D 2	Y 9	Amount 80.-	
Full Name of Contributor Jerry & Ruth Billman				Registration Number, if PAC			
Street Address 788 Claycross Ct		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check			
City Galloway	State OH	Zip Code 43119	M 0	D 2	Y 0	Amount 80.-	
Full Name of Contributor Wendi & David Stewart				Registration Number, if PAC			
Street Address 9273 Hampshire Ct		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check			
City Powell	State OH	Zip Code 43065	M 0	D 2	Y 0	Amount 70.-	
Full Name of Contributor Natalie & Kenneth Stark				Registration Number, if PAC			
Street Address 7177 Dean Farm Rd		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check			
City New Albany	State OH	Zip Code 43054	M 0	D 2	Y 0	Amount 70.-	
Full Name of Contributor Carl & Mary Metzger				Registration Number, if PAC			
Street Address 4932 McNulty St		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check			
City Grove City	State OH	Zip Code 43123	M 0	D 2	Y 0	Amount 70.-	
Full Name of Contributor Jill & Timothy Burke				Registration Number, if PAC			
Street Address 4643 Barnwood Dr		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check			
City Grove City	State OH	Zip Code 43123	M 0	D 2	Y 0	Amount 70.-	
Full Name of Contributor Tracy & Brett Harmon				Registration Number, if PAC			
Street Address 230 Farm Creek		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check			
City Gahanna	State OH	Zip Code 43230	M 0	D 2	Y 0	Amount 90.-	
Full Name of Contributor Edward & Judy Ahlmer				Registration Number, if PAC			
Street Address 6382 Wahl Ct		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check			
City Grove City	State OH	Zip Code 43123	M 0	D 2	Y 0	Amount 90.-	

* 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 employers contribute via payroll deduction and exceed the aggregate of \$100, the name of organization of which the employees are members, if any, must also appear. [R.C. 3517. 0(B)(4)]

Page Total \$0.00

620.-