## Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full	-						
Citizens for Quality Schools							
Full Name of Contributor	. <u> </u>				er, if PA(	c	
Justin Sanford							
Street Address	Employer/Occu,	pation/Labor Organization*				Form (Cash, Che	eck, etc.)
1748 Harrison Pond Dr					Ì	check	
City	State	Zip Code	M	D	Y	Amount	
New Albany	OH	43054		0 6			100.00
Full Name of Contributor				ion Numbe		С	
Teachers Wear Jeans Fundraiser (don	nations each	less than \$20)	L				
Street Address		mation/Labor Organization*				Form (Cash, Che	xk, etc.)
Middle School East and West					1	cash	
City	State	Zip Code	М	D	Y	Amount	
Gahanna	ОН	43230	1 0	0 7	1 4		110.00
Full Name of Contributor				ion Numb		С	
Michele Henry			I			_	
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Che	eck, etc.)
855 Ludwig Dr	,	=			ļ	check	
City	State	Zip Code	М	D	Y	Amount	
Gahanna	OH	43230			1 4	1	40.00
Full Name of Contributor				non Numb		.c	
Iessica Anderson			1		. = "		
Street Address	Employer/Occu	upation/Labor Organization*				Form (Cash, Che	eck. etc.)
13228 Durham Cir	, _j <del></del>	J ———			ì	check	•
City	State	Zip Code	M	D	Y	Amount	
Pickerington	OH	43147			1 4	1	10.00
Fill Name of Contributor	<u></u>	-W & &!		tion Numb		'C	_ 0.00
William Knott							
VVIIIIam Knott	Employer/Occ	upation/Labor Organization*	Щ_			Form (Cash, Ch	eck, etc.)
8957 Woodside St NW	المحاددوسي					check	
8957 Woodside St INW	State	Zip Code	М	a	Y	Amount	
1 '	OH		1 0		1 4		15.00
Canal Winchester Full Name of Contributor	<u> </u>	· <u>-</u>		tion Numb			10.00
Andrea Varasso-Mulisano			المستوسط.	•	.,		
Andrea Varasso-Mulisano Street Address	Employee#0	upation/Labor Organization*				Form (Cash, Ch	eck etc )
1	-шрюуст/Осс					check	
5302 Branscom Blvd	State	Zip Code	м	D	Y	Amount	
City		-			-		25.00
Westerville	OH	43081		0 6 ntion Numb			23.00
Full Name of Contributor	nations == -1	s loss than early	Ive Signa	THE PARTY	<b>!!</b> [*]		
Teachers Wear Jeans Fundraiser (do			Ь.			Form (Cash, Ch	seck etc 1
Street Address Chanolicald Flomantary	глиріоу <del>с</del> т/Осс	cupation/Labor Organization*				_	
Chapelfield Elementary	ē.	7in Cade	14	n	Y	cash	
City	State OLI	Zip Code	м 1 О	D O 6		Amount	100.00
Gahanna	OH	43230	1 0	0 6 ation Numb			100.00
Full Name of Contributor			Registra	addi Num.	wei, II Pi		
T-shirt Fundraiser	<b>.</b> .	upasic=# -1 - 0	<u> </u>			Form /Cont. To	mole esc.
Street Address	Employer/Occ	Employer/Occupation/Labor Organization*				Form (Cash, Cl	LLUAL CIC.)
Į.,	-	7' 6 1		_	.,	cash	
City	State	Zip Code	M 1 0	D =	Y 1 4	Amount	10.00
	OH_		1 0	1 5	1 4	-1	10.00

<sup>•</sup> 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)]