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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full				CONTRACTOR OF THE PARTY OF THE			
Citizens for Quality Schools							
Full Name of Contributor			-			1.0	
Besy Coccia			Registra	ition ivun	nber, if Pa	AC	
Street Address	TEmployer/Ossu	notion / obos Oscanization*				E (0.1.0)	
822 DeerRun	Employer/Occu	pation/Labor Organization*				Form (Cash, Che	ck, etc.)
City	State	Zip Code		1 5	T - 1,7	check	
Gahanna	O H	43230	M	D	Y	Amount	FO 00
Full Name of Contributor		43230	0 3	PROFESSIONAL PROFESSION	10	A.C.	52.00
Ryan Beck			Registra	ition ivun	nber, if Pa	AC .	
Street Address	TEmployar/Occur	pation/Labor Organization*	<u> </u>	***************************************	######################################	F (0 1 0)	
6695 Hayhurst St	Employer/Occu	pation/Labor Organization				Form (Cash, Ched	ck, etc.)
City ·	State	Zip Code	M	T D	1 17	check	
Worthington	OH	43085	1	D	1 0	Amount	40.00
Full Name of Contributor		1 43003	0 3	THE RESERVE OF THE PERSON NAMED IN	1 U	The state of the s	48.00
Tracy Dyckman			Registra	ition Nun	iber, it P/	40	
Street Address	Employer/Occus	pation/Labor Organization*	<u> </u>	and the second s	**************	Form (Cook Char	-14- \
5188 Dry Creek	Employen occu	pation Eason Organization				Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	check Amount	
Dublin	OH	43016	0 3	1 '	$\begin{vmatrix} 1 \\ 1 \end{vmatrix} 0$	Amoun	4E 00
Full Name of Contributor		1 43010	CONTRACTOR OF THE PERSON NAMED IN COLUMN		ber, if PA	\ C	45.00
Jennifer Candor			Registi	ition ivun	1001, 11 F	AC.	
Street Address	Employer/Occur	pation/Labor Organization*	<u> </u>			Form (Cash, Ched	ak ata)
80 Southwind Drive	Jampioy on o cou	Jacob Organization				check	ok, etc.)
City	State	Zip Code	M	D	Y	Amount	
Gahanna	OH	43230	0 3		$\begin{vmatrix} 1 & 0 \end{vmatrix}$	Amount	54.00
Full Name of Contributor		10200	THE PROPERTY OF THE PARTY OF	Character Advisor Company	ber, if PA	10	34.00
Philip Peters			i cogistit	ition , van	1001, 11 1 2		
Street Address	Employer/Occur	pation/Labor Organization*	L	WAR 1 March 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Form (Cash, Chec	rk etc.)
5273 Mason Rd						check	JR, 0(0.)
City	State	Zip Code	М	D	Y	Amount	
Canal Winchester	$O \mid H$	43110	0 3	ł	1 0	, anount	75.00
Full Name of Contributor		1 10110		Communication of the land	ber, if PA	VC.	75.00
Karen Winkle			8		,		
Street Address	Employer/Occur	oation/Labor Organization*				Form (Cash, Chec	ck etc.)
201 Farm Creek Dr		•				check	.,,
City	State	Zip Code	M	D	Y	Amount	
Gahanna	OH	43230	0 3	0 2	1 0		60.00
Full Name of Contributor			CONTRACTOR DESCRIPTION OF THE PARTY OF THE P	CHIEF THE STREET	ber, if P	VC	00.00
Chris Schwinnen							
Street Address	Employer/Occup	pation/Labor Organization*		Park Control C		Form (Cash, Chec	k, etc.)
2458 Charles Mill Dr						check	, ,
City	State	Zip Code	М	D	Y	Amount	
Hilliard	OH	43026	0 3	0 2	1 0		54.00
Full Name of Contributor	4-2-14-14-14-14-14-14-14-14-14-14-14-14-14-		THE RESERVE OF THE PARTY OF THE	and the same of th	ber, if PA	\C	2 2,00
Margaret Scott							
Street Address	Employer/Occup	ation/Labor Organization*	- Branco-constant	***************************************		Form (Cash, Chec	k, etc.)
195 Rivers Edge Way						check	
City	State	Zip Code	M	D	Y	Amount	· · · · · · · · · · · · · · · · · · ·
Gahanna	OH	43230	0 3	0 2	1 0		60.00

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

Page	Total	\$ 448.00