

## Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for UA Schools									
Full Name of Contributor Charles Freiburger						Registration Number, if PAC			
Street Address 2435 Lane Woods Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus			State OH	Zip Code 43221		M 0	D 7	Y 1	Amount \$100.00
Full Name of Contributor Joel Buck						Registration Number, if PAC			
Street Address 1502 Cardiff Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus			State OH	Zip Code 43221		M 0	D 7	Y 1	Amount \$50.00
Full Name of Contributor Sharon Recker Reisman						Registration Number, if PAC			
Street Address 2349 Haverford Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus			State OH	Zip Code 43220		M 0	D 7	Y 1	Amount \$50.00
Full Name of Contributor Murray Murphy Moul & Basil						Registration Number, if PAC			
Street Address 1533 Lake Shore Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus			State OH	Zip Code 43204		M 0	D 7	Y 1	Amount \$250.00
Full Name of Contributor Armstrong Mortgage Company						Registration Number, if PAC			
Street Address 1225 Dublin Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus			State OH	Zip Code 43215		M 0	D 7	Y 1	Amount \$250.00
Full Name of Contributor Pamela Bridgeport						Registration Number, if PAC			
Street Address 3691 Romnay Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Upper Arlington			State OH	Zip Code 43220		M 0	D 7	Y 2	Amount \$100.00
Full Name of Contributor Maura Bowen						Registration Number, if PAC			
Street Address 2825 Eastcleft Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus			State OH	Zip Code 43221		M 0	D 7	Y 2	Amount \$50.00
Full Name of Contributor Dr. Milagro Patricia Castaneda						Registration Number, if PAC			
Street Address 1354 London Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus			State OH	Zip Code 43221		M 0	D 7	Y 2	Amount \$25.00

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