

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens For Southwestern City Schools												
Full Name of Contributor John Dubos, DDS						Registration Number, if PAC						
Street Address 5055 Dietrich Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash						
City Orient			State OH	Zip Code 43146		M 0		D 3		Y 1409		Amount \$178.00
Full Name of Contributor The Final Floor, INC.						Registration Number, if PAC						
Street Address P.O. Box 380			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check						
City Sugar Grove			State OH	Zip Code 43155		M 0		D 3		Y 1609		Amount \$100.00
Full Name of Contributor Ruscilli Construction Co. Inc.						Registration Number, if PAC						
Street Address 2041 Arlingate Lne			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check						
City Columbus			State OH	Zip Code 43228		M 0		D 3		Y 1209		Amount \$3000.00
Full Name of Contributor Mary Ellen Cahill						Registration Number, if PAC						
Street Address 866 Lynnhaven Ct			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check						
City Columbus			State OH	Zip Code 43228		M 0		D 3		Y 1309		Amount \$75.00
Full Name of Contributor Norton Middle School PTSA						Registration Number, if PAC						
Street Address 215 Norton Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check						
City Columbus			State OH	Zip Code 43228		M 0		D 3		Y 1709		Amount \$200.00
Full Name of Contributor Karolyn S. King						Registration Number, if PAC						
Street Address 6011 Grant Run PL			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check						
City Grove City			State OH	Zip Code 43123		M 0		D 3		Y 2009		Amount \$100.00
Full Name of Contributor Dalchem dba. G & L Supply Co. & Janton Co.						Registration Number, if PAC						
Street Address P.O. Box 1059			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check						
City Mansfield			State OH	Zip Code 44901		M 0		D 3		Y 1709		Amount \$25.00
Full Name of Contributor Buckeye Woods PTA						Registration Number, if PAC						
Street Address 2525 Holton Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check						
City Grove City			State OH	Zip Code 43123		M 0		D 3		Y 1409		Amount \$300.00

* 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)]

Page Total **\$0.00**

3978.00