

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools							
Full Name of Contributor Kristopher Fuller					Registration Number, if PAC		
Street Address 477 Vista Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Gahanna	State O H	Zip Code 43230	M 1 0	D 0 4	Y 1 0	Amount 40.00	
Full Name of Contributor Dianna Downing					Registration Number, if PAC		
Street Address 295 Stewart Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43206	M 1 0	D 0 4	Y 1 0	Amount 40.00	
Full Name of Contributor Connie Phillips					Registration Number, if PAC		
Street Address 5427 Coral Berry Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43235	M 1 0	D 0 4	Y 1 0	Amount 40.00	
Full Name of Contributor Susan Moore					Registration Number, if PAC		
Street Address 1042 Kenwick Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43209	M 1 0	D 0 4	Y 1 0	Amount 100.00	
Full Name of Contributor Derek Straiton					Registration Number, if PAC		
Street Address 225 Stonemast Loop		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Pataskala	State O H	Zip Code 43062	M 1 0	D 0 4	Y 1 0	Amount 80.00	
Full Name of Contributor Connie Adams					Registration Number, if PAC		
Street Address 909 Danvers Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Westerville	State O H	Zip Code 43081	M 1 0	D 0 4	Y 1 0	Amount 20.00	
Full Name of Contributor James Birath					Registration Number, if PAC		
Street Address 6355 Andrews Dr West		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Westerville	State O H	Zip Code 43082	M 1 0	D 0 4	Y 1 0	Amount 80.00	
Full Name of Contributor Ryan Lockwood					Registration Number, if PAC		
Street Address 342 Letchworth Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43204	M 1 0	D 0 4	Y 1 0	Amount 65.00	

* 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)]