

Statement of Contributions Received

Prescribed by Secretary of State 03/05

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Name of Committee in Full Citizens For Southwestern City Schools									
Full Name of Contributor Robert W. or Barbara E. Reisling							Registration Number, if PAC		
Street Address 765 Citation CT				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Gahanna		State OH		Zip Code 43230		M D Y 071409		Amount 50.-	
Full Name of Contributor Randall & Kelly Reisling							Registration Number, if PAC		
Street Address 3178 Ranke Ct				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City		State OH		Zip Code 43123		M D Y 071509		Amount 1000.-	
Full Name of Contributor Grove City Football Mothers/Supporters Club							Registration Number, if PAC		
Street Address PO Box 575				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City		State OH		Zip Code 43123		M D Y 071409		Amount 900.-	
Full Name of Contributor William & Amy Wise							Registration Number, if PAC		
Street Address 2458 Hickorybend CT				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City		State OH		Zip Code 43123		M D Y 071509		Amount 750.-	
Full Name of Contributor John D. Morrow							Registration Number, if PAC		
Street Address 3634 Christopher Pl.				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City		State OH		Zip Code 43123		M D Y 062909		Amount 50.-	
Full Name of Contributor Rolla M. Beach III							Registration Number, if PAC		
Street Address 4148 Nowanne Ct				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus		State OH		Zip Code 43214		M D Y 072109		Amount 50.-	
Full Name of Contributor Frank & Georgine Collette							Registration Number, if PAC		
Street Address 3844 Stonestrow Lane				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard		State OH		Zip Code 43026		M D Y 072209		Amount 50.-	
Full Name of Contributor Christy Murray							Registration Number, if PAC		
Street Address 3180 Park ST				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City		State OH		Zip Code 43123		M D Y 072309		Amount 25.-	

* 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