

Statement of Contributions Received

Prescribed by Secretary of State 03/05

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Name of Committee to Full							
Citizens For Southwestern City Schools							
Full Name of Contributor						Registration Number, if PAC	
South Western Education Assoc.							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
4074 Hoover Rd Ste 201				Check			
City	State	Zip Code	M	D	Y	Amount	
Grove City	OH	43123	1	2	7	1	5000.-
Full Name of Contributor						Registration Number, if PAC	
South-Western Administrators Assoc.							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
No Address Given				Check			
City	State	Zip Code	M	D	Y	Amount	
	OH		1	1	30	1	2000.-
Full Name of Contributor						Registration Number, if PAC	
Philip Warner							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
1148 Heather Run				Pay Pal			
City	State	Zip Code	M	D	Y	Amount	
Wilmingon	OH	45177	0	1	17	1	93.90
Full Name of Contributor						Registration Number, if PAC	
Franklin Heights PTS A							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
1001 Demorest Rd				Check			
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43204	0	1	13	1	50.-
Full Name of Contributor						Registration Number, if PAC	
Westland Area Business Assoc							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
PO Box 282035				Check			
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43228	0	1	10	1	1000.-
Full Name of Contributor						Registration Number, if PAC	
Jason Chad Dotson							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
3323 Pebble Beach Rd. W				Check			
City	State	Zip Code	M	D	Y	Amount	
Grove City	OH	43123	1	2	9	1	200.-
Full Name of Contributor						Registration Number, if PAC	
Clinton & Jennifer Rardon							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
2308 Josephine Circle				Check			
City	State	Zip Code	M	D	Y	Amount	
Grove City	OH	43123	1	2	19	1	100.-
Full Name of Contributor						Registration Number, if PAC	
Scott Counts							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
560 E Cooke Rd				Check			
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43214	1	2	3	1	50.-

* 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. (X)(4))