

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools							
Full Name of Contributor Cheryl Bower					Registration Number, if PAC		
Street Address 506 Stratshire Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Gahanna	State O H	Zip Code 43230	M 0	D 4	Y 2	Amount 50.00	
Full Name of Contributor Ann Griffith					Registration Number, if PAC		
Street Address 2503 Olde Hill ct N		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Columbus	State O H	Zip Code 43221	M 0	D 4	Y 2	Amount 50.00	
Full Name of Contributor Kimberly Frasher					Registration Number, if PAC		
Street Address 212 Brookhill Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Gahanna	State O H	Zip Code 43220	M 0	D 4	Y 2	Amount 70.00	
Full Name of Contributor Victoria Franklin					Registration Number, if PAC		
Street Address 9219 Johnstown Utica Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Johnstown	State O H	Zip Code 43031	M 0	D 4	Y 2	Amount 20.00	
Full Name of Contributor Chris Falkenberg					Registration Number, if PAC		
Street Address 415 Sutterton Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Gahanna	State O H	Zip Code 43230	M 0	D 4	Y 2	Amount 100.00	
Full Name of Contributor Mark Miller					Registration Number, if PAC		
Street Address 608 Sycamore Mill Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Gahanna	State O H	Zip Code 43230	M 0	D 4	Y 2	Amount 200.00	
Full Name of Contributor Michael Cebriak					Registration Number, if PAC		
Street Address 361 Westerdale Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Gahanna	State O H	Zip Code 43230	M 0	D 4	Y 2	Amount 50.00	
Full Name of Contributor Andrea Oquin					Registration Number, if PAC		
Street Address 7326 State Route 19		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Mount Gilead	State O H	Zip Code 43338	M 0	D 4	Y 2	Amount 70.00	

* 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)]