## Statement of Contributions Received

Prescribed by Secretary of State 3/05

	·			alminus sininus sini				
Name of Committee in Full								
Citizens for Quality Schools Full Name of Contributor			www.meinerinerrorlandif#Obstraces#SSHifthStraces#paless#15F04fiber	Register	tion M.	her if D	\C	
Elizabeth Miller				registra	ition Num	ioei, ii PA	40	
Street Address	Employe	r/Occum	ation/Labor Organization*	<u> </u>			Form (Cash, Chec	k etc \
	Lampioye	,, Occupa	ation/ Daton Organization				check	n, uu.)
7796 Worley Dr	Sta	ot e	Zip Code	M	D	ΙΥ	CHECK Amount	
Blacklick	O	Н	43004	$\begin{vmatrix} \mathbf{M} \\ 0 \end{vmatrix} 3$	1	1 0	, anounc	50.00
Full Name of Contributor	oganious extraorios mais de la constantidad de la c				tion Nur	ACCUPATION OF THE PROPERTY OF	4C	
Linda Reasoner								
Street Address	Employe	r/Occupa	ation/Labor Organization*	Actualización de la constanta de la constan			Form (Cash, Chec	k, etc.)
437 Bluestem Ave							check	
City	Sta	ate	Zip Code	М	D	Y	Amount	
Gahanna	0	Н	43230	0 3	0 2	1 0		50.00
Full Name of Contributor	TRANSPORTATION AND ADDRESS OF			and account out of the last	ition Num	and the second second second	4C	
Connie Phillips								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Chec	k, etc.)
5427 Coral Berry Drive							check	
City	Sta		Zip Code	M	D	Y	Amount	
Columbus	0	Н	43235	0 3	0 2	1 0		80.00
Full Name of Contributor					tion Nun			anication tiporationis
Patricia King								
Street Address	Employe	г/Оссира	ation/Labor Organization*	- Sample of the Control of the Contr			Form (Cash, Chec	k, etc.)
9193 Firstgate Dr							check	
City	Sta	ate	Zip Code	М	D	Y	Amount	······································
Reynoldsburg	0	Н	43068	0 3	0 2	1 0		70.00
Full Name of Contributor				Registra	ition Nun	nber, if P	4C	
Mark Miller								
Street Address	Employe	r/Occupa	ation/Labor Organization*			**************	Form (Cash, Chec	k, etc.)
608 Sycamore Mill Dr							check	
City	Sta		Zip Code	M	D	Y	Amount	
Gahanna	0	Н	43230	0 3	0 2	1 0		80.00
Full Name of Contributor				Registra	ation Num	nber, if P	AC	
Ryan Lockwood					Change of the Control			
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Chec	k, etc.)
342 Letchworht Ave							check	
City	Sta		Zip Code	M	D	Y	Amount	
Columbus	0	Н	43204	03	0 2	1 0		60.00
Full Name of Contributor				Registra	ation Nun	nber, if P	AC	
Rodney Tolliver					Ottober 100			
Street Address	Employe	r/Occupa	ation/Labor Organization*				Form (Cash, Chec	k, etc.)
3627 Olentangy Blvd							check	
City	Sta		Zip Code	M	D	Y	Amount	
Columbus	0	H	43214	03	0 2	1 0		50.00
Full Name of Contributor			and the second s	Registra	tion Nun	nber, if P	AC	
Lee Hirtle				L				
Street Address	Employe	r/Occupa	ation/Labor Organization*				Form (Cash, Chec	k, etc.)
6403 Walnut St							check	
City	Sta		Zip Code	М	D	Y	Amount	***************************************
Westerville	0	Н	43081	0 3	0 2	1 0		67.55

Page T	otal \$	507.55	

<sup>\*</sup> 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)]