

Statement of Contributions Received

Prescribed by Secretary of State 03/03

Name of Contributor to Full									
Citizens for Southwestern City Schools									
Full Name of Contributor Paul Towery					Registration Number, if PAC				
Street Address 1540 Cole Road			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check			
City Columbus	State OH	Zip Code 43228	M 0	D 2	Y 23	Amount 100.-			
Joseph Clark									
Full Name of Contributor Joseph Clark					Registration Number, if PAC				
Street Address 2769 Buxton Ln			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check			
City Grove City	State OH	Zip Code 43123	M 0	D 2	Y 23	Amount 20.-			
Jerry Billman									
Full Name of Contributor Jerry Billman					Registration Number, if PAC				
Street Address 788 Claycross Court			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check			
City Galloway	State OH	Zip Code 43119	M 0	D 2	Y 23	Amount 70.-			
Michael Lanese									
Full Name of Contributor Michael Lanese					Registration Number, if PAC				
Street Address 4594 Goodman St			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check			
City Grove City	State OH	Zip Code 43123	M 0	D 2	Y 23	Amount 70.-			
Jeffrey Davis									
Full Name of Contributor Jeffrey Davis					Registration Number, if PAC				
Street Address 2694 Hanbury Ct			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check			
City Grove City	State OH	Zip Code 43123	M 0	D 2	Y 23	Amount 70.-			
Jill Burke									
Full Name of Contributor Jill Burke					Registration Number, if PAC				
Street Address 4643 Burnwood Dr			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check			
City Grove City	State OH	Zip Code 43123	M 0	D 2	Y 23	Amount 70.-			
Linda Kuhn									
Full Name of Contributor Linda Kuhn					Registration Number, if PAC				
Street Address 460 Trillium Dr			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check			
City Galloway	State OH	Zip Code 43119	M 0	D 2	Y 21	Amount 35.-			
Catherine Johnson									
Full Name of Contributor Catherine Johnson					Registration Number, if PAC				
Street Address 7475 Opossum Run Rd			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check			
City London	State OH	Zip Code 43140	M 0	D 2	Y 21	Amount 35.-			

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of individual's business, if any, rather than employer should be listed. If two or more employers contribute via payroll deduction and exceed the aggregate of \$100, the organization of which the employees are members, if any, must also appear. (R.C. 3517.08(B)(4))