

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full CITIZENS For Southwestern City Schools							
Full Name of Contributor DeerField Ventures Inc						Registration Number, if PAC	
Street Address 2224 Stringtown Rd		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Grove City	State OH	Zip Code 43123	M 06	D 21	Y 09	Amount \$100.-	
Full Name of Contributor Angel Animal Hospital INC.						Registration Number, if PAC	
Street Address 175 Galloway Road		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Galloway	State OH	Zip Code 43119	M 06	D 25	Y 09	Amount \$200.-	
Full Name of Contributor Richard E. Robinson						Registration Number, if PAC	
Street Address 2464 Martha's Woods Ct.		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Grove City	State OH	Zip Code 43123	M 06	D 18	Y 09	Amount \$100.-	
Full Name of Contributor Darby Woods Elementary PTA						Registration Number, if PAC	
Street Address 255 Westwoods Blvd		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Galloway	State OH	Zip Code 43119	M 06	D 23	Y 09	Amount \$484.00	
Full Name of Contributor Franklin Equipment LLC						Registration Number, if PAC	
Street Address 915 Harmon Ave		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43223	M 06	D 23	Y 09	Amount \$250.-	
Full Name of Contributor Capital City Mechanical						Registration Number, if PAC	
Street Address P.O. Box 178		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Grove City	State OH	Zip Code 43123	M 06	D 11	Y 09	Amount \$300.-	
Full Name of Contributor Thomas or Nancy Snashall						Registration Number, if PAC	
Street Address 2799 Annabelle Ct		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Grove City	State OH	Zip Code 43123	M 06	D 01	Y 09	Amount \$100.-	
Full Name of Contributor Melissa L. Burke						Registration Number, if PAC	
Street Address 4629 Hunting Creek Dr.		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Grove City	State OH	Zip Code 43123	M 06	D 01	Y 09	Amount \$20.-	

* 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)]