

## Statement of Contributions Received

Prescribed by Secretary of State 3/05

|  |                              |   |               |               |  |                        |  |
|--|------------------------------|---|---------------|---------------|--|------------------------|--|
| Name of Committee in Full<br><b>Citizens for Quality Schools</b> |                              |   |               |               |  |                        |  |
| Full Name of Contributor<br><b>Katie Brown</b>                   |                              |   |               |               | Registration Number, if PAC              |                        |  |
| Street Address<br><b>541 Antler Ct</b>                           |                              | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Gahanna</b>   | State<br><b>O</b>   <b>H</b> | Zip Code<br><b>43230</b>                | M<br><b>0</b> | D<br><b>3</b> | Y<br><b>0</b>                            | Amount<br><b>70.00</b> |  |
| Full Name of Contributor<br><b>Cindy Harris</b>                  |                              |   |               |               | Registration Number, if PAC              |                        |  |
| Street Address<br><b>4366 Colby Ave</b>                          |                              | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Columbus</b>  | State<br><b>O</b>   <b>H</b> | Zip Code<br><b>43227</b>                | M<br><b>0</b> | D<br><b>3</b> | Y<br><b>0</b>                            | Amount<br><b>25.00</b> |  |
| Full Name of Contributor<br><b>Ashley Winner</b>                 |                              |   |               |               | Registration Number, if PAC              |                        |  |
| Street Address<br><b>3679 Preserve Crossing Blvd</b>             |                              | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Gahanna</b>   | State<br><b>O</b>   <b>H</b> | Zip Code<br><b>4230</b>                 | M<br><b>0</b> | D<br><b>3</b> | Y<br><b>0</b>                            | Amount<br><b>50.00</b> |  |
| Full Name of Contributor<br><b>Brian Behary</b>                  |                              |   |               |               | Registration Number, if PAC              |                        |  |
| Street Address<br><b>4795 Westerville Run Rd</b>                 |                              | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Gahanna</b>   | State<br><b>O</b>   <b>H</b> | Zip Code<br><b>43230</b>                | M<br><b>0</b> | D<br><b>3</b> | Y<br><b>0</b>                            | Amount<br><b>50.00</b> |  |
| Full Name of Contributor<br><b>Kelly Donaldson</b>               |                              |   |               |               | Registration Number, if PAC              |                        |  |
| Street Address<br><b>320 Walook Court</b>                        |                              | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Gahanna</b>   | State<br><b>O</b>   <b>H</b> | Zip Code<br><b>43230</b>                | M<br><b>0</b> | D<br><b>3</b> | Y<br><b>0</b>                            | Amount<br><b>80.00</b> |  |
| Full Name of Contributor<br><b>Jennifer Wilson</b>               |                              |   |               |               | Registration Number, if PAC              |                        |  |
| Street Address<br><b>879 S Roosevelt Rd</b>                      |                              | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Bexley</b>  | State<br><b>O</b>   <b>H</b> | Zip Code<br><b>43209</b>                | M<br><b>0</b> | D<br><b>3</b> | Y<br><b>0</b>                            | Amount<br><b>50.00</b> |  |
| Full Name of Contributor<br><b>Colleen Alexander</b>             |                              |   |               |               | Registration Number, if PAC              |                        |  |
| Street Address<br><b>8386 Yuma Dr</b>                            |                              | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Powell</b>  | State<br><b>O</b>   <b>H</b> | Zip Code<br><b>43085</b>                | M<br><b>0</b> | D<br><b>3</b> | Y<br><b>0</b>                            | Amount<br><b>90.00</b> |  |
| Full Name of Contributor<br><b>Karen Robison</b>                 |                              |   |               |               | Registration Number, if PAC              |                        |  |
| Street Address<br><b>573 Elm Ct</b>                              |                              | Employer/Occupation/Labor Organization* |               |               | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Westerville</b>                                       | State<br><b>O</b>   <b>H</b> | Zip Code<br><b>43082</b>                | M<br><b>0</b> | D<br><b>3</b> | Y<br><b>0</b>                            | Amount<br><b>90.00</b> |  |

\* 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)]

Page Total \$ 505.00