

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 Jami + Eric Butler					Registration Number, if PAC		
Street Address 2371 Hunterstown Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 0	D 3	Y 16	Amount \$ 5.-	
Full Name of Contributor Richard Shaw					Registration Number, if PAC		
Street Address 2481 Delowe ST		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 0	D 3	Y 18	Amount \$ 5.-	
Full Name of Contributor Lisa Block					Registration Number, if PAC		
Street Address 189 N Merkle Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43209	M 0	D 3	Y 20	Amount \$ 5.-	
Full Name of Contributor Jennifer + Jimmy Sizemore					Registration Number, if PAC		
Street Address 7291 Harrisburg London		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Orient	State OH	Zip Code 43146	M 0	D 4	Y 03	Amount \$ 5.-	
Full Name of Contributor Rebecca Lasham					Registration Number, if PAC		
Street Address 6780 Bluebird Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Orient	State OH	Zip Code 43146	M 0	D 3	Y 26	Amount \$ 15.-	
Full Name of Contributor Frederick Moore					Registration Number, if PAC		
Street Address 899 Harmony Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Gahanna	State OH	Zip Code 43230	M 0	D 4	Y 03	Amount \$ 30.-	
Full Name of Contributor Cash Contribution					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City	State OH	Zip Code	M 0	D 4	Y 27	Amount \$ 107.00	
Full Name of Contributor Erin or Michael Ricketts					Registration Number, if PAC		
Street Address 1316 Baccarat Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43228	M 0	D 3	Y 31	Amount \$ 5.-	

* 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)]

Page Total **\$0.00**

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