

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 James & Linda Swearingen						Registration Number, if PAC			
Street Address 2303 Milligan Grove			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City		State OH	Zip Code 43123		M 1	D 0	Y 3	Amount 40.-	
Full Name of Contributor Janet Schmitthorst - Newton						Registration Number, if PAC			
Street Address 2151 Fairfax Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43221		M 1	D 0	Y 4	Amount 40.-	
Full Name of Contributor Whitney Cole						Registration Number, if PAC			
Street Address 7460 Havens Corners Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Blacklick		State OH	Zip Code 43004		M 1	D 0	Y 4	Amount 40.-	
Full Name of Contributor Andrew & Julie Haack						Registration Number, if PAC			
Street Address 6366 Red Bank Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City		State OH	Zip Code 43123		M 0	D 9	Y 3	Amount 40.-	
Full Name of Contributor Elizabeth & Aaron Lapp						Registration Number, if PAC			
Street Address 2862 Sunset Maple N			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City		State OH	Zip Code 43123		M 0	D 9	Y 2	Amount 40.-	
Full Name of Contributor Douglas & 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 1	D 0	Y 4	Amount 60.-	
Full Name of Contributor Rachelle & Solomon Parsley						Registration Number, if PAC			
Street Address 4325 Vista Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City		State OH	Zip Code 43123		M 1	D 0	Y 3	Amount 60.-	
Full Name of Contributor Nancy & John Sheldon Hampson						Registration Number, if PAC			
Street Address 3322 Grovepark Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City		State OH	Zip Code 43123		M 1	D 0	Y 4	Amount 60.-	

* 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)]