

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for UA Schools						
Full Name of Contributor Mark Wagenbrenner				Registration Number, if PAC		
Street Address 575 W. First Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 8	Y 2	Amount \$250.00
Full Name of Contributor Bob White				Registration Number, if PAC		
Street Address 2338 Club Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 8	Y 2	Amount \$250.00
Full Name of Contributor Becky Scholl				Registration Number, if PAC		
Street Address 1679 Cambridge Boulevard		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43212	M 0	D 8	Y 2	Amount \$20.00
Full Name of Contributor Edwin Overmyer				Registration Number, if PAC		
Street Address 2480 Stonehaven Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 8	Y 2	Amount \$100.00
Full Name of Contributor Tremco				Registration Number, if PAC		
Street Address 3735 Green Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Beachwood	State OH	Zip Code 44122	M 0	D 8	Y 2	Amount \$500.00
Full Name of Contributor Scott, Scriven & Wahoff, LLP				Registration Number, if PAC		
Street Address 50 W. Broad Street, Suite 2500		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 8	Y 2	Amount \$1,000.00
Full Name of Contributor Sondra Zigler				Registration Number, if PAC		
Street Address 2955 Pickwick		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 8	Y 2	Amount \$50.00
Full Name of Contributor Steven Kretzer				Registration Number, if PAC		
Street Address 2219 Fairfax Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43221	M 0	D 8	Y 2	Amount \$100.00

* 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)]