

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 & Janet Lester							Registration Number, if PAC		
Street Address 2821 Homecoming Dr				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City		State OH		Zip Code 43123		M D Y 06 27 09		Amount \$200.-	
Full Name of Contributor William & Betty Phillis							Registration Number, if PAC		
Street Address 1019 Torrey Hill Dr				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43228		M D Y 06 26 09		Amount \$100.-	
Full Name of Contributor Marilyn Crabbe							Registration Number, if PAC		
Street Address 4880 Hall Road				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43228		M D Y 07 01 09		Amount \$25.-	
Full Name of Contributor Credit Union of Ohio							Registration Number, if PAC		
Street Address 5500 Britton Parkway-				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard		State OH		Zip Code 43026		M D Y 07 10 09		Amount \$100.-	
Full Name of Contributor Pamela or John Ewalt							Registration Number, if PAC		
Street Address 1092 Beaujolais PL				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Galloway		State OH		Zip Code 43119		M D Y 06 02 09		Amount \$50.-	
Full Name of Contributor Stacy P. Mandrell							Registration Number, if PAC		
Street Address 2244 Presley Dr				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City		State OH		Zip Code 43123		M D Y 06 01 09		Amount \$50.-	
Full Name of Contributor J. Patrick Callaghan & Mary Ann Callaghan							Registration Number, if PAC		
Street Address 4634 Oracle Lane				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard		State OH		Zip Code 43026		M D Y 06 01 09		Amount \$50.-	
Full Name of Contributor John & Patti Sammeth							Registration Number, if PAC		
Street Address 2980 Longridge Way				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City		State OH		Zip Code 43123		M D Y 06 01 09		Amount \$50.-	

* 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)]

625.-