

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Quality Schools							
Full Name of Contributor Shirley Katzmeyer					Registration Number, if PAC		
Street Address 895 Ludwig Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Gahanna	State OH	Zip Code 43230	M 1	D 0	Y 1	Amount \$12.00	
Full Name of Contributor Andrea Esterby					Registration Number, if PAC		
Street Address 609 Moss Oak Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Gahanna	State OH	Zip Code 43230	M 1	D 0	Y 1	Amount \$12.00	
Full Name of Contributor Patricia Kovacevich					Registration Number, if PAC		
Street Address 205 Ashley Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Gahanna	State OH	Zip Code 43230	M 1	D 0	Y 1	Amount \$25.00	
Full Name of Contributor Johnel Amerson					Registration Number, if PAC		
Street Address 424 Hanton Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43214	M 1	D 0	Y 1	Amount \$30.00	
Full Name of Contributor Tailgate Fundraiser- Admission \$10/adult \$6/kids					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City	State OH	Zip Code	M 1	D 0	Y 1	Amount \$601.00	
Full Name of Contributor T-shirt Fundraiser (donations each less than \$20)					Registration Number, if PAC		
Street Address Middle School South		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Gahanna	State OH	Zip Code 43230	M 1	D 0	Y 1	Amount \$228.00	
Full Name of Contributor Cathalee Kankiewicz					Registration Number, if PAC		
Street Address 492 Langford Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Gahanna	State OH	Zip Code 43230	M 1	D 0	Y 8	Amount \$10.00	
Full Name of Contributor Kristina Fleishman					Registration Number, if PAC		
Street Address 2134 Odema Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Lima	State OH	Zip Code 45806	M 1	D 0	Y 9	Amount \$10.00	

* 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)]