

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 Randall Reising							Registration Number, if PAC		
Street Address 3178 Ranke Ct				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		M 02		D 21	
						Y 15		Amount 100.-	
Full Name of Contributor Burges & Burges Strategists							Registration Number, if PAC		
Street Address 26100 Lake Shore Blvd				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Euclid		State OH		Zip Code 44132		M 02		D 21	
						Y 15		Amount 280.-	
Full Name of Contributor Michael Royer							Registration Number, if PAC		
Street Address 5695 Morningstar Dr				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City Galloway		State OH		Zip Code 43119		M 02		D 21	
						Y 15		Amount 108.-	
Full Name of Contributor Julia Bricker							Registration Number, if PAC		
Street Address 1095 Rousseau Ln				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City Galloway		State OH		Zip Code 43119		M 02		D 21	
						Y 15		Amount 50.-	
Full Name of Contributor Jodi Billman-Kotsko							Registration Number, if PAC		
Street Address 2300 State Route 56 NW				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City London		State OH		Zip Code 43140		M 02		D 21	
						Y 15		Amount 75.-	
Full Name of Contributor Jerry Billman							Registration Number, if PAC		
Street Address 788 Claycross Ct				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City Galloway		State OH		Zip Code 43119		M 02		D 21	
						Y 15		Amount 125.-	
Full Name of Contributor Gary Leasure							Registration Number, if PAC		
Street Address 4780 Saint Andrews Dr				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City Grove City		State OH		Zip Code 43123		M 02		D 21	
						Y 15		Amount 100.-	
Full Name of Contributor Mary Mulvaney							Registration Number, if PAC		
Street Address 4739 Hunting Creek Dr				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City Grove City		State OH		Zip Code 43123		M 02		D 21	
						Y 15		Amount 30.-	

* 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)]