

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools							
Full Name of Contributor Fred Donelson					Registration Number, if PAC		
Street Address 787 Headley Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City Gahanna	State O H	Zip Code 43230	M 0 3	D 1 9	Y 1 0	Amount 15.00	
Full Name of Contributor Julia Cromwell Shutsa					Registration Number, if PAC		
Street Address 850 Eaglenest Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City Akron	State O H	Zip Code 44303	M 0 3	D 1 6	Y 1 0	Amount 1.00	
Full Name of Contributor Beth Cotner					Registration Number, if PAC		
Street Address 262 Faye Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City Gahanna	State O H	Zip Code 43230	M 0 4	D 0 8	Y 1 0	Amount 5.00	
Full Name of Contributor Kevin Sheets					Registration Number, if PAC		
Street Address 209 Glenhurst Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City Gahanna	State O H	Zip Code 43230	M 0 4	D 0 8	Y 1 0	Amount 5.00	
Full Name of Contributor Julie Becker					Registration Number, if PAC		
Street Address 466 Whitson Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City Gahanna	State O H	Zip Code 43230	M 0 4	D 1 0	Y 1 0	Amount 25.00	
Full Name of Contributor Al McKenna					Registration Number, if PAC		
Street Address 202 Academy Ct W		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City Gahanna	State O H	Zip Code 43230	M 0 4	D 1 2	Y 1 0	Amount 100.00	
Full Name of Contributor Starr Winston					Registration Number, if PAC		
Street Address 7617 Hutton Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CC		
City Blacklick	State O H	Zip Code 43230	M 0 4	D 1 3	Y 1 0	Amount 5.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 156.00