

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for UA Schools									
Full Name of Contributor Limbach Company LLC						Registration Number, if PAC			
Street Address 822 Cleveland Avenue			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus			State OH		Zip Code 43201		M D Y 0 8 1 0 1 2		Amount \$500.00
Full Name of Contributor Kelli Wilcox						Registration Number, if PAC			
Street Address 2137 Chardon Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus			State OH		Zip Code 43220		M D Y 0 8 1 1 1 2		Amount \$25.00
Full Name of Contributor Nancy Falk						Registration Number, if PAC			
Street Address 2175 Lane Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus			State OH		Zip Code 43220		M D Y 0 8 1 2 1 2		Amount \$50.00
Full Name of Contributor Julie Vannatta						Registration Number, if PAC			
Street Address 2170 Waltham Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus			State OH		Zip Code 43221		M D Y 0 8 1 2 1 2		Amount \$100.00
Full Name of Contributor Joel Cloud						Registration Number, if PAC			
Street Address 1389 London Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus			State OH		Zip Code 43221		M D Y 0 8 1 2 1 2		Amount \$50.00
Full Name of Contributor James Sicaras						Registration Number, if PAC			
Street Address 1955 Upper Chelsea Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Upper Arlington			State OH		Zip Code 43221		M D Y 0 8 1 2 1 2		Amount \$50.00
Full Name of Contributor Lynn Schrader Anderson						Registration Number, if PAC			
Street Address 1873 Baldrige Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus			State OH		Zip Code 43221		M D Y 0 8 1 3 1 2		Amount \$50.00
Full Name of Contributor Arthur J. Gallagher & Co.						Registration Number, if PAC			
Street Address Two Pierce Place			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Itasca			State IL		Zip Code 60143		M D Y 0 8 1 3 1 2		Amount \$1,000.00

* 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)]