31-A
R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Citizens for Quality Schools							
Full Name of Contributor						Registration Number, if PAC	
Lori Kokales							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
1640 Minturn Dr							check
City	State	Zip Code	M	D	Y		Amount
New Albany	O | H	43054	0 | 9	2 | 8	1 | 0		25.00
Full Name of Contributor						Registration Number, if PAC	
Blaine Henry							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
404 Colony Park Dr							check
City	State	Zip Code	M	D	Y		Amount
Pickerington	O | H	43147	0 | 9	2 | 8	1 | 0		25.00
Full Name of Contributor						Registration Number, if PAC	
Stephanie Heter							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
950 Timothy Dr							check
City	State	Zip Code	M	D	Y		Amount
Gahanna	O | H	43230	0 | 9	2 | 8	1 | 0		50.00
Full Name of Contributor						Registration Number, if PAC	
Whitney Sapienza							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
3585 Lake Louise Dr							check
City	State	Zip Code	M	D	Y		Amount
Grove City	O | H	43123	0 | 9	2 | 8	1 | 0		55.00
Full Name of Contributor						Registration Number, if PAC	
Katherine Young							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
5558 Parker Hill Lane							check
City	State	Zip Code	M	D	Y		Amount
Dublin	O | H	43017	0 | 9	2 | 8	1 | 0		25.00
Full Name of Contributor						Registration Number, if PAC	
Cheryl Bower							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
506 Stratshire Lane							check
City	State	Zip Code	M	D	Y		Amount
Gahanna	O | H	43230	0 | 9	2 | 8	1 | 0		180.00
Full Name of Contributor						Registration Number, if PAC	
Jennifer Sengstock							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
562 Lake Knoll Ct							check
City	State	Zip Code	M	D	Y		Amount
Gahanna	O | H	43230	0 | 9	2 | 8	1 | 0		25.00
Full Name of Contributor						Registration Number, if PAC	
Paulie Basford							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
1322 Haybrook Dr							check
City	State	Zip Code	M	D	Y		Amount
Gahanna	O | H	43230	0 | 9	2 | 8	1 | 0		100.00

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

Page Total $ 485.00