

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 Stephanie Baker & Adam Burk						Registration Number, if PAC	
Street Address 1821 Ashland Ave				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43212		Amount 70.- ✓	
Full Name of Contributor Hugh & Marsha Garside							
Street Address 4631 Lombardo St				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		Amount 70.- ✓	
Full Name of Contributor Philip & Sandra Warner							
Street Address 1148 Heather Row				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Wilmington		State OH		Zip Code 45177		Amount 70.- ✓	
Full Name of Contributor Edward & Judy Palmer							
Street Address 6382 Waket Cr				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		Amount 70.- ✓	
Full Name of Contributor Daniel & Amy Boland							
Street Address 3498 Treeline Ln				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		Amount 70.- ✓	
Full Name of Contributor Scott & Bay Cunningham							
Street Address 4716 Glen Lakes Dr				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Powell		State OH		Zip Code 43065		Amount 70.- ✓	
Full Name of Contributor William & Betty Phillis							
Street Address 1019 Torrey Hill Dr				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43228		Amount 100.- ✓	
Full Name of Contributor International Collision Repair Center							
Street Address 5575 W. Broad St				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43228		Amount 100.- ✓	

* 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 employers 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. 3517.05(B)(4))