Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full					***************************************		***************************************
Citizens for Quality Schools							
Full Name of Contributor		och minnen sintämisia musa munitationilla minnen musa	Registra	ation Nun	her if P	4 <i>C</i>	Access and the second s
Kathy Squillace			registre	acion i van	1001, 11 1 1	10	
Street Address	Employer/Occu	pation/Labor Organization*	L		and the same of th	Form (Cash, Che	ck, etc.)
753 Black Gold Ave	' '					cash	,
City	State	Zip Code	M	T D	Y	Amount	
Gahanna	ОН	43230	0 3	0 2	1 0		20.00
Full Name of Contributor				ation Nun	English Company	AC	
Heather Turner			l				
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Che	ck, etc.)	
1009 Cameron Crossing Blvd						cash	
City	State	Zip Code	М	D	Y	Amount	
Westerville	OH	43081	0 3	0 2	1 0		20.00
Full Name of Contributor			Marie Company of the	ation Nun	ber, if P	AC	***************************************
Becky Turner							
Street Address	Employer/Occu	pation/Labor Organization*		******************************		Form (Cash, Che	:ck, etc.)
238 Academy Woods Dr						cash	
City	State	Zip Code	М	D	Y	Amount	
Gahanna	0 H	43230	0 3	0 2	1 0		20.00
Full Name of Contributor			Registra	ation Nun	ber, if P	AC	(
Larry Fouts				74Modernost revenuess	**************************************		unimmin en marrous voersumme
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
759 Odevene Way						cash	
City	State	Zip Code] M	D	Y	Amount	
Delaware	OH	43015		0 2	1 0		60.00
Full Name of Contributor			Registra	ation Nun	ber, if P	AC	
Mary Wingert Street Address							ALIGORIANI CONTROL CON
	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
4077 Berrybush Drive	2	Total Salar	1	1	r	cash	~~~ <u>~~~~~</u>
City	State H	Zip Code	M	D	Y	Amount	E0.00
Columbus Full Name of Contributor	OH	43230		0 2	1 0		50.00
¥			Kegistra	ation Nun	iber, if PA	AC.	
Erin Scott Street Address	Employer/Ocau	pation/Labor Organization*			ZONOWA WALLOW	E (C1- Cl-	-1
488 Tresham Rd	Employer/Occu	pation/Labor Organization*				Form (Cash, Che	.ck, etc.)
City	State	Zip Code	M	D	ΙΥ	Cash Amount	
Gahanna	OH	43230	0 3	1	1 0	Amount	30.00
Full Name of Contributor	101-] 43230	<u> </u>	tion Nun	distribution of the last of th	\C	30.00
Kathy Jacob			Kogisar	icion riun	1001, 11 1 7		
Street Address	Employer/Occu	pation/Labor Organization*	l	Management of the second		Form (Cash, Che	ck etc.)
222 Rivers Edge Way		and baren or Barrisanien				cash	010, 010.)
City	State	Zip Code	М	D	Y	Amount	
Gahanna	OH	43230	0 3	1 .	10	- Engan,	70.00
Full Name of Contributor		1 10400	denicating interest materials	tion Num	No.	AC .	70.00
David Ring			1 -54		. , •		
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Che	ck, etc.)	
6077 Hilmer Dr				cash			
City	State	Zip Code	M	D	Y	Amount	
Westerville	OH	43082	0 3	0 2	1 0		50.00
			CONTRACTOR OF THE PARTY OF THE	a manie in a		Surrence and a surren	***************************************

Page Total	\$ 320.00

^{*} 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)]