

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools									
Full Name of Contributor Kathy Squillace						Registration Number, if PAC			
Street Address 753 Black Gold Ave			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash		
City Gahanna	State O	H H	Zip Code 43230	M 0	D 3	Y 0	Amount 20.00		
Full Name of Contributor Heather Turner						Registration Number, if PAC			
Street Address 1009 Cameron Crossing Blvd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash		
City Westerville	State O	H H	Zip Code 43081	M 0	D 3	Y 0	Amount 20.00		
Full Name of Contributor Becky Turner						Registration Number, if PAC			
Street Address 238 Academy Woods Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash		
City Gahanna	State O	H H	Zip Code 43230	M 0	D 3	Y 0	Amount 20.00		
Full Name of Contributor Larry Fouts						Registration Number, if PAC			
Street Address 759 Odevene Way			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash		
City Delaware	State O	H H	Zip Code 43015	M 0	D 3	Y 0	Amount 60.00		
Full Name of Contributor Mary Wingert						Registration Number, if PAC			
Street Address 4077 Berrybush Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash		
City Columbus	State O	H H	Zip Code 43230	M 0	D 3	Y 0	Amount 50.00		
Full Name of Contributor Erin Scott						Registration Number, if PAC			
Street Address 488 Tresham Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash		
City Gahanna	State O	H H	Zip Code 43230	M 0	D 3	Y 0	Amount 30.00		
Full Name of Contributor Kathy Jacob						Registration Number, if PAC			
Street Address 222 Rivers Edge Way			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash		
City Gahanna	State O	H H	Zip Code 43230	M 0	D 3	Y 0	Amount 70.00		
Full Name of Contributor David Ring						Registration Number, if PAC			
Street Address 6077 Hilmer Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash		
City Westerville	State O	H H	Zip Code 43082	M 0	D 3	Y 0	Amount 50.00		

* 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 \$ 320.00