

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Contributor in Full									
Citizens For Southwestern City Schools									
Full Name of Contributor Bryce & Mary Mulvaney							Registration Number, if PAC		
Street Address 4739 Hunting Creek Dr				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		M D Y 10 29 11		Amount 105.- ✓	
Full Name of Contributor Mark or Amy Shaw									
Street Address 4165 Haughw Rd							Registration Number, if PAC		
Street Address 4165 Haughw Rd				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		M D Y 10 21 11		Amount 35.- ✓	
Full Name of Contributor Southwestern Education Association									
Street Address 4074 Hoover Rd Ste 201							Registration Number, if PAC		
Street Address 4074 Hoover Rd Ste 201				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		M D Y 10 12 11		Amount 280.- ✓	
Full Name of Contributor Ronald Meyer									
Street Address 2329 Featherwood Dr							Registration Number, if PAC		
Street Address 2329 Featherwood Dr				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43228		M D Y 10 27 11		Amount 50.- ✓	
Full Name of Contributor Melinda Garverick									
Street Address 1135 White Rd.							Registration Number, if PAC		
Street Address 1135 White Rd.				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		M D Y 12 09 11		Amount \$465. ⁰⁰ ✓	
Full Name of Contributor J.C. Sommer PTA									
Street Address 3055 Kingston Ave							Registration Number, if PAC		
Street Address 3055 Kingston Ave				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		M D Y 12 13 11		Amount 250. ⁰⁰ ✓	
Full Name of Contributor Thomas & Sherry Minton									
Street Address 1619 Tuscarora Dr							Registration Number, if PAC		
Street Address 1619 Tuscarora Dr				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		M D Y 11 03 11		Amount 35.- ✓	
Full Name of Contributor J. Patrick Callaghan									
Street Address 4634 Oracle Ln							Registration Number, if PAC		
Street Address 4634 Oracle Ln				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Hilliard		State OH		Zip Code 43026		M D Y 10 20 11		Amount 35.- ✓	

* 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. 0(B)(4))