

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 Brian & Amy Crosier						Registration Number, if PAC	
Street Address 5836 Katara Dr.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Galloway	State OH	Zip Code 43119	M 0	D 3	Y 10	Amount \$ 5.-	
Full Name of Contributor John Lanich						Registration Number, if PAC	
Street Address 4581 Nettlecreek Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Urbana	State OH	Zip Code 43078	M 0	D 4	Y 03	Amount \$ 50.-	
Full Name of Contributor Janet Hager						Registration Number, if PAC	
Street Address 6290 Bausch Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Galloway	State OH	Zip Code 43119	M 0	D 4	Y 03	Amount \$ 5.-	
Full Name of Contributor Raymond Pertuset						Registration Number, if PAC	
Street Address 827 Lancia Lane			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Galloway	State OH	Zip Code 43119	M 0	D 3	Y 00	Amount \$ 15.-	
Full Name of Contributor Marie & Daniel Gift						Registration Number, if PAC	
Street Address 400 Weymouth Lane			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43228	M 0	D 3	Y 18	Amount \$ 20.-	
Full Name of Contributor Sharon & William Bradford						Registration Number, if PAC	
Street Address 2297 Spring Cress Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Grove City	State OH	Zip Code 43123	M 0	D 4	Y 01	Amount \$ 5.-	
Full Name of Contributor Mark & Julie Becker						Registration Number, if PAC	
Street Address 15094 Township Road 403			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Thornville	State OH	Zip Code 43076	M 0	D 3	Y 20	Amount \$ 9.-	
Full Name of Contributor Christine L. Smith						Registration Number, if PAC	
Street Address 6960 O'Harra Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Galloway	State OH	Zip Code 43119	M 0	D 4	Y 03	Amount \$ 5.-	

* 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 also appear. (R.C. 3517.10(B)(4))

Page Total **\$0.00**

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