

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools									
Full Name of Contributor Ron Foltz						Registration Number, if PAC			
Street Address 350 Winnow Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Sunbury	State O H	Zip Code 43074	M 0	D 4	Y 2	Y 1	Y 1	Y 1	Amount 100.00
Full Name of Contributor Sherryl Bourgeois						Registration Number, if PAC			
Street Address 4130 Maize Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43224	M 0	D 4	Y 2	Y 1	Y 1	Y 1	Amount 100.00
Full Name of Contributor Suzanne Dashner						Registration Number, if PAC			
Street Address 759 Hardtack Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Gahanna	State O H	Zip Code 43230	M 0	D 4	Y 1	Y 8	Y 1	Y 1	Amount 28.41
Full Name of Contributor Ellen Maxwell						Registration Number, if PAC			
Street Address 1266 Ashburnham Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) credit card		
City Gahanna	State O H	Zip Code 43230	M 0	D 4	Y 2	Y 5	Y 1	Y 1	Amount 40.00
Full Name of Contributor Dustin Dashner						Registration Number, if PAC			
Street Address 7754 Lupine Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) credit card		
City Blacklick	State O H	Zip Code 43004	M 0	D 4	Y 2	Y 5	Y 1	Y 1	Amount 30.00
Full Name of Contributor Ashley Hamilton						Registration Number, if PAC			
Street Address 6381 Tattler Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) credit card		
City Gahanna	State O H	Zip Code 43230	M 0	D 4	Y 2	Y 7	Y 1	Y 1	Amount 40.00
Full Name of Contributor Bellacino's Pizza						Registration Number, if PAC			
Street Address 4926 Morse Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43230	M 0	D 5	Y 0	Y 4	Y 1	Y 1	Amount 60.16
Full Name of Contributor Gahanna 05 LLC						Registration Number, if PAC			
Street Address 82 Granville St			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check		
City Gahanna	State O H	Zip Code 43230	M 0	D 5	Y 0	Y 4	Y 1	Y 1	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)]