31-A R.C. 3517.10



## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

N 60 1 1 1 1								
Name of Committee in Full								
Citizens for Quality Schools Full Name of Contributor				In . i.e.	37	i cn.	C	
					Registration Number, if PAC			
Kimberly Neary	le i						lu (6   6   1	
Street Address	Employer/	Occupa	tion/Labor Organization*				Form (Cash, Cheel	c, etc.)
860 North Stygler			1				check	
City	Stat	H ·	Zip Code	M	D	Y	Amount	40.00
Gahanna	<u>  O  </u>	11	43230			$1 \mid 0$		40.00
Full Name of Contributor Registration Number, if PAC								
Melissa George								
Street Address	Employer/	Оссира	ttion/Labor Organization*				Form (Cash, Check	(, etc.)
680 Woodmark Run							check	
City	Stat		Zip Code	M	D	Y	Amount	
Gahanna	0	Н	43230	0 9	2 8	1 0		20.00
Full Name of Contributor				Registra	tion Num	ber, if PA	.c	
Heather Haringa								
Street Address	Employer/	Occupa	tion/Labor Organization*				Form (Cash, Check	c, etc.)
13540 Sudbury Rd NW							check	
City	Stat	te	Zip Code	М	D	Y	Amount	
Pickerington	$\mid \circ \mid$	Н	43147	019	2 8	1 0		40.00
Full Name of Contributor	•		•	Registra		ber, if PA		
Susan Johnston				1				
Street Address	Employer/	Осспра	tion/Labor Organization*	-			Form (Cash, Check	c, etc.)
4365 Braunton Rd							check	
City	Stat	ic	Zip Code	М	D	Y	Amount	
Columbus	lοι	Н	43220	0 9	2   8	1 0		50.00
Full Name of Contributor	<u> </u>		10220			ber, if PA	C	50.00
Jenifer Judy							· <del>-</del>	
Street Address	Employer	Оссира	ntion/Labor Organization*				Form (Cash, Check	c etc.)
2960 Mondavi Ct	Sampley et/	осопри	mon Endor Organization				check	., e.e.,
City	Stat	-μ	Zip Code	Тм	D	Y	Amount	
Hilliard		Н	43026	0 9		1		20.00
Full Name of Contributor	101	11	43020					20.00
Full Name of Contributor  Ann Griffith  Registration Number, if PAC								
Street Address	E-male	0	.io.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.			-	Form (Cash, Check	4- \
	Employer/Occupation/Labor Organization*					1	ι, ειτ.)	
2593 Olde Hill Ct N	Cont		7. 0. 1	1 14		1 17	check	
	Stat	H	Zîp Code	M	D	Y	Amount	E0.00
Columbus	0	11	43221			1 0		50.00
Full Name of Contributor				Kegistra	tion Num	ber, if PA	C	
Kristen Smith	1						<b>-</b>	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
424 Highmeadows Village Dr	ļ		T				check	
City	Stat		Zip Code	M	D	Y	Amount	
Powell	0	Н	43065			$1 \mid 0$		20.00
Full Name of Contributor Registration Number, if PAC								
Debbie Zamora								
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Cheel	c, etc.)	
651 Sycamore Mill Dr	<u> </u>				check			
City	Stat		Zip Code	М	D	Y	Amount	
Gahanna	0	Н	43230	0 9	2 8	1 0		80.00

Page Total \$ 320.00

<sup>\*</sup> 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)]