

## Statement of Contributions Received

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Prescribed by Secretary of State 03/05

| Name of Committee in Full              |  |  |  |  |                                        |  |          |  |                          |  |
|----------------------------------------|--|--|--|--|----------------------------------------|--|----------|--|--------------------------|--|
| Citizens For Southwestern City Schools |  |  |  |  |                                        |  |          |  |                          |  |
| Full Name of Contributor               |  |  |  |  | Registration Number, if PAC            |  |          |  |                          |  |
| William & Betty Phillips               |  |  |  |  |                                        |  |          |  |                          |  |
| Street Address                         |  |  |  |  | Employer/Occupation/Labor Organization |  |          |  |                          |  |
| 1019 Torrey Hill Dr                    |  |  |  |  |                                        |  |          |  |                          |  |
| City                                   |  |  |  |  | State                                  |  | Zip Code |  | Form (Cash, Check, etc.) |  |
| Columbus                               |  |  |  |  | OH                                     |  | 43228    |  | Check                    |  |
|                                        |  |  |  |  | M                                      |  | D        |  | Y                        |  |
|                                        |  |  |  |  | 0                                      |  | 1        |  | 24                       |  |
|                                        |  |  |  |  |                                        |  |          |  | 12                       |  |
|                                        |  |  |  |  |                                        |  |          |  | Amount                   |  |
|                                        |  |  |  |  |                                        |  |          |  | \$300.-                  |  |
| Full Name of Contributor               |  |  |  |  |                                        |  |          |  |                          |  |
| Steed Hammond Paul, Inc                |  |  |  |  |                                        |  |          |  |                          |  |
| Registration Number, if PAC            |  |  |  |  |                                        |  |          |  |                          |  |
|                                        |  |  |  |  |                                        |  |          |  |                          |  |
| Street Address                         |  |  |  |  | Employer/Occupation/Labor Organization |  |          |  |                          |  |
| 82 Williams Ave                        |  |  |  |  |                                        |  |          |  |                          |  |
| City                                   |  |  |  |  | State                                  |  | Zip Code |  | Form (Cash, Check, etc.) |  |
| Hamilton                               |  |  |  |  | OH                                     |  | 45015    |  | Check                    |  |
|                                        |  |  |  |  | M                                      |  | D        |  | Y                        |  |
|                                        |  |  |  |  | 0                                      |  | 2        |  | 08                       |  |
|                                        |  |  |  |  |                                        |  |          |  | 12                       |  |
|                                        |  |  |  |  |                                        |  |          |  | Amount                   |  |
|                                        |  |  |  |  |                                        |  |          |  | \$2500.-                 |  |
| Full Name of Contributor               |  |  |  |  |                                        |  |          |  |                          |  |
| Hugh & Marsha Garside                  |  |  |  |  |                                        |  |          |  |                          |  |
| Registration Number, if PAC            |  |  |  |  |                                        |  |          |  |                          |  |
|                                        |  |  |  |  |                                        |  |          |  |                          |  |
| Street Address                         |  |  |  |  | Employer/Occupation/Labor Organization |  |          |  |                          |  |
| 4631 Lombardo Street                   |  |  |  |  |                                        |  |          |  |                          |  |
| City                                   |  |  |  |  | State                                  |  | Zip Code |  | Form (Cash, Check, etc.) |  |
| Grove City                             |  |  |  |  | OH                                     |  | 43123    |  | Check                    |  |
|                                        |  |  |  |  | M                                      |  | D        |  | Y                        |  |
|                                        |  |  |  |  | 0                                      |  | 2        |  | 08                       |  |
|                                        |  |  |  |  |                                        |  |          |  | 12                       |  |
|                                        |  |  |  |  |                                        |  |          |  | Amount                   |  |
|                                        |  |  |  |  |                                        |  |          |  | \$500.-                  |  |
| Full Name of Contributor               |  |  |  |  |                                        |  |          |  |                          |  |
| Grove City Greyhound Booster Club      |  |  |  |  |                                        |  |          |  |                          |  |
| Registration Number, if PAC            |  |  |  |  |                                        |  |          |  |                          |  |
|                                        |  |  |  |  |                                        |  |          |  |                          |  |
| Street Address                         |  |  |  |  | Employer/Occupation/Labor Organization |  |          |  |                          |  |
| PO Box 338                             |  |  |  |  |                                        |  |          |  |                          |  |
| City                                   |  |  |  |  | State                                  |  | Zip Code |  | Form (Cash, Check, etc.) |  |
| Grove City                             |  |  |  |  | OH                                     |  | 43123    |  | Check                    |  |
|                                        |  |  |  |  | M                                      |  | D        |  | Y                        |  |
|                                        |  |  |  |  | 0                                      |  | 2        |  | 06                       |  |
|                                        |  |  |  |  |                                        |  |          |  | 12                       |  |
|                                        |  |  |  |  |                                        |  |          |  | Amount                   |  |
|                                        |  |  |  |  |                                        |  |          |  | \$500.-                  |  |
| Full Name of Contributor               |  |  |  |  |                                        |  |          |  |                          |  |
| Russell Construction Co                |  |  |  |  |                                        |  |          |  |                          |  |
| Registration Number, if PAC            |  |  |  |  |                                        |  |          |  |                          |  |
|                                        |  |  |  |  |                                        |  |          |  |                          |  |
| Street Address                         |  |  |  |  | Employer/Occupation/Labor Organization |  |          |  |                          |  |
| 2041 Arlingate Lane                    |  |  |  |  |                                        |  |          |  |                          |  |
| City                                   |  |  |  |  | State                                  |  | Zip Code |  | Form (Cash, Check, etc.) |  |
| Columbus                               |  |  |  |  | OH                                     |  | 43228    |  | Check                    |  |
|                                        |  |  |  |  | M                                      |  | D        |  | Y                        |  |
|                                        |  |  |  |  | 0                                      |  | 2        |  | 02                       |  |
|                                        |  |  |  |  |                                        |  |          |  | 12                       |  |
|                                        |  |  |  |  |                                        |  |          |  | Amount                   |  |
|                                        |  |  |  |  |                                        |  |          |  | \$1000.-                 |  |
| Full Name of Contributor               |  |  |  |  |                                        |  |          |  |                          |  |
| Ed & Judy Palmer                       |  |  |  |  |                                        |  |          |  |                          |  |
| Registration Number, if PAC            |  |  |  |  |                                        |  |          |  |                          |  |
|                                        |  |  |  |  |                                        |  |          |  |                          |  |
| Street Address                         |  |  |  |  | Employer/Occupation/Labor Organization |  |          |  |                          |  |
| 6382 Wahler Ct                         |  |  |  |  |                                        |  |          |  |                          |  |
| City                                   |  |  |  |  | State                                  |  | Zip Code |  | Form (Cash, Check, etc.) |  |
| Grove City                             |  |  |  |  | OH                                     |  | 43123    |  | Check                    |  |
|                                        |  |  |  |  | M                                      |  | D        |  | Y                        |  |
|                                        |  |  |  |  | 0                                      |  | 2        |  | 08                       |  |
|                                        |  |  |  |  |                                        |  |          |  | 12                       |  |
|                                        |  |  |  |  |                                        |  |          |  | Amount                   |  |
|                                        |  |  |  |  |                                        |  |          |  | \$100.-                  |  |
| Full Name of Contributor               |  |  |  |  |                                        |  |          |  |                          |  |
| Thomas & Julie Willison                |  |  |  |  |                                        |  |          |  |                          |  |
| Registration Number, if PAC            |  |  |  |  |                                        |  |          |  |                          |  |
|                                        |  |  |  |  |                                        |  |          |  |                          |  |
| Street Address                         |  |  |  |  | Employer/Occupation/Labor Organization |  |          |  |                          |  |
| 2417 Zimer Cir N                       |  |  |  |  |                                        |  |          |  |                          |  |
| City                                   |  |  |  |  | State                                  |  | Zip Code |  | Form (Cash, Check, etc.) |  |
| Grove City                             |  |  |  |  | OH                                     |  | 43123    |  | Check                    |  |
|                                        |  |  |  |  | M                                      |  | D        |  | Y                        |  |
|                                        |  |  |  |  | 0                                      |  | 2        |  | 08                       |  |
|                                        |  |  |  |  |                                        |  |          |  | 12                       |  |
|                                        |  |  |  |  |                                        |  |          |  | Amount                   |  |
|                                        |  |  |  |  |                                        |  |          |  | \$50.-                   |  |
| Full Name of Contributor               |  |  |  |  |                                        |  |          |  |                          |  |
| Mark or Amy Shaw                       |  |  |  |  |                                        |  |          |  |                          |  |
| Registration Number, if PAC            |  |  |  |  |                                        |  |          |  |                          |  |
|                                        |  |  |  |  |                                        |  |          |  |                          |  |
| Street Address                         |  |  |  |  | Employer/Occupation/Labor Organization |  |          |  |                          |  |
| 4165 Haughw Rd                         |  |  |  |  |                                        |  |          |  |                          |  |
| City                                   |  |  |  |  | State                                  |  | Zip Code |  | Form (Cash, Check, etc.) |  |
| Grove City                             |  |  |  |  | OH                                     |  | 43123    |  | Check                    |  |
|                                        |  |  |  |  | M                                      |  | D        |  | Y                        |  |
|                                        |  |  |  |  | 0                                      |  | 2        |  | 08                       |  |
|                                        |  |  |  |  |                                        |  |          |  | 12                       |  |
|                                        |  |  |  |  |                                        |  |          |  | Amount                   |  |
|                                        |  |  |  |  |                                        |  |          |  | \$50.-                   |  |

\* 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 name of organization of which the employees are members, if any, must also appear. [R.C. 3517, Q(4)]

Page Total \$0.00