

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 Patricia Pfeiffer						Registration Number, if PAC	
Street Address 2861 Chateau Circle S		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43221	M 0	D 5	Y 2709	Amount 5.-	
Full Name of Contributor Karen Cook						Registration Number, if PAC	
Street Address 2426 Hardesty Dr S		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43204	M 0	D 5	Y 2009	Amount 5.-	
Full Name of Contributor Stephens & Mary Lyons						Registration Number, if PAC	
Street Address 5553 High Arbor Dr		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Galloway	State OH	Zip Code 43119	M 0	D 5	Y 3109	Amount 5.-	
Full Name of Contributor Robert Milburn						Registration Number, if PAC	
Street Address 5780 Newington Dr		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Hilliard	State OH	Zip Code 43026	M 0	D 5	Y 3109	Amount 5.-	
Full Name of Contributor Southwestern Council of PTA's						Registration Number, if PAC	
Street Address 1231 Pinnacle Dr		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43204	M 0	D 5	Y 2609	Amount 250.-	
Full Name of Contributor Jean & Matthew George						Registration Number, if PAC	
Street Address 907 Josephine Ave		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43204	M 0	D 6	Y 0909	Amount 20.-	
Full Name of Contributor Jawice Workman						Registration Number, if PAC	
Street Address 2100 Shirlewe Dr		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Grove City	State OH	Zip Code 43123	M 0	D 6	Y 1009	Amount 40.-	
Full Name of Contributor William & Betty Phillips						Registration Number, if PAC	
Street Address 1019 Torrey Hill Dr.		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43228	M 0	D 6	Y 0209	Amount 100.-	

* 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)]