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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full						· · · · · · · · · · · · · · · · · · ·		
Citizens for Quality Schools								
Full Name of Contributor				Registration Number, if PAC				
Rachel Wachtman								
Street Address	Employe	er/Occupa	ation/Labor Organization*	-Bassananananan			Form (Cash, Che	ck, etc.)
8706 Cedarbrook St Nw							check	
City	St	ate	Zip Code	М	D	Y	Amount	
Pickerington	0	Н	43147	0 3	0 2	1 0		90.00
Full Name of Contributor Registration Number, if PAC								
Brandyce Cogar								
Street Address	Employe	Employer/Occupation/Labor Organization*					Form (Cash, Che	ck, etc.)
11113 Lafayette Drive							check	
City	St	ate	Zip Code	M	D	Y	Amount	
Parma	0	H	44130	0 3	0 2	1 0		50.00
Full Name of Contributor				Registra	tion Num	ber, if PA	\C	
Beth Davis				L				00000000000000000000000000000000000000
Street Address	Employe	Employer/Occupation/Labor Organization*					Form (Cash, Che	ck, etc.)
370 Chilton Pl							check	
City	St	ate	Zip Code	М	D	Y	Amount	
Gahanna	0	H	43230	0 3	0 2	1 0		75.00
Full Name of Contributor				Registra	tion Num	ber, if PA	AC	
Theresa Jones					smanna sining Mulaukiinii			
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
5425 North Meadows Blvd							check	
City	Si	ate	Zip Code	М	D	Y	Amount	
Columbus	0	H	43229	0 3		$1 \mid 0$		50.00
Full Name of Contributor Registration Number, if PAC								
Sarah Hanson						***************************************		
Street Address	Employ	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
3198 Canyon Bluff Dr					•	,	check	
City	S	tate	Zip Code	М	D	Y	Amount	
Canal Winchester	O	H	43110	0 3	Mary Company of the C	1 0		60.00
Full Name of Contributor				Registra	ation Num	iber, if PA	AC	
Nikki Marks				<u> </u>	***********			***************************************
Street Address	Employer/Occupation/Labor Organization*				Form (Ca			eck, etc.)
104 W Columbus St				T	T ==		check	
City	l .	tate	Zip Code	M	D	Y	Amount	100.00
Canal Winchester	<u> </u>	∣ H	43110	0 3				100.00
Full Name of Contributor				Registra	ation Nun	iber, if P	AC	
Kristen Groves	I	- 10	-di-aff-di-aff-	_ <b>L</b>	NOTE OF THE OWNER, OWNE	**********	Form (Cb Cb	ank atc
Street Address	Employ	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
7507 Ashley Meadow Dr			[g]: C. J.	137	T 15	TV	check	
City		tate	Zip Code	M	D	Y	Amount	150.00
Blacklick	<u> </u>	H	43004		0 2			130.00
Full Name of Contributor Registration Number, if PAC								
Sharon Suriano	15.	- 10	(		-200 Telescontinues	<del>entrimination de la compla</del>	E (C1- C'	aale ate \
Street Address	Employ	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
5784 Albany Green			la: o. i.	1	1 -	1 37	check	
City	1	tate	Zip Code	M	D	Y	Amount	E0.00
Westerville	0	H	43081	0 3	0 2	1 0	1	58.00

Page Total \$ 633.00

<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)]