

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

|                                                                  |                       |                                         |                   |                   |                                          |                        |  |
|------------------------------------------------------------------|-----------------------|-----------------------------------------|-------------------|-------------------|------------------------------------------|------------------------|--|
| Name of Committee in Full<br><b>Citizens for Quality Schools</b> |                       |                                         |                   |                   |                                          |                        |  |
| Full Name of Contributor<br><b>Jill Rak</b>                      |                       |                                         |                   |                   | Registration Number, if PAC              |                        |  |
| Street Address<br><b>175 Brookhill Dr</b>                        |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Gahanna</b>                                           | State<br><b>O   H</b> | Zip Code<br><b>43230</b>                | M<br><b>0   9</b> | D<br><b>2   8</b> | Y<br><b>1   0</b>                        | Amount<br><b>75.00</b> |  |
| Full Name of Contributor<br><b>Abigail Murray</b>                |                       |                                         |                   |                   | Registration Number, if PAC              |                        |  |
| Street Address<br><b>1456 Elmwood Ave</b>                        |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Columbus</b>                                          | State<br><b>O   H</b> | Zip Code<br><b>43212</b>                | M<br><b>0   9</b> | D<br><b>2   8</b> | Y<br><b>1   0</b>                        | Amount<br><b>57.00</b> |  |
| Full Name of Contributor<br><b>Lindsay Dexter</b>                |                       |                                         |                   |                   | Registration Number, if PAC              |                        |  |
| Street Address<br><b>6402 Skimmer Ln</b>                         |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Columbus</b>                                          | State<br><b>O   H</b> | Zip Code<br><b>43230</b>                | M<br><b>0   9</b> | D<br><b>2   8</b> | Y<br><b>1   0</b>                        | Amount<br><b>50.00</b> |  |
| Full Name of Contributor<br><b>Brynn Bardelang</b>               |                       |                                         |                   |                   | Registration Number, if PAC              |                        |  |
| Street Address<br><b>138 Academy Woods Dr</b>                    |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Gahanna</b>                                           | State<br><b>O   H</b> | Zip Code<br><b>43230</b>                | M<br><b>0   9</b> | D<br><b>2   8</b> | Y<br><b>1   0</b>                        | Amount<br><b>40.00</b> |  |
| Full Name of Contributor<br><b>Laurie Stewart</b>                |                       |                                         |                   |                   | Registration Number, if PAC              |                        |  |
| Street Address<br><b>6494 Bromfield Dr</b>                       |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Westerville</b>                                       | State<br><b>O   H</b> | Zip Code<br><b>43082</b>                | M<br><b>0   9</b> | D<br><b>2   8</b> | Y<br><b>1   0</b>                        | Amount<br><b>50.00</b> |  |
| Full Name of Contributor<br><b>Heather Repasky</b>               |                       |                                         |                   |                   | Registration Number, if PAC              |                        |  |
| Street Address<br><b>462 Sutterton Dr</b>                        |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Columbus</b>                                          | State<br><b>O   H</b> | Zip Code<br><b>43230</b>                | M<br><b>0   9</b> | D<br><b>2   8</b> | Y<br><b>1   0</b>                        | Amount<br><b>75.00</b> |  |
| Full Name of Contributor<br><b>Sarah Hanson</b>                  |                       |                                         |                   |                   | Registration Number, if PAC              |                        |  |
| Street Address<br><b>3198 Canyon Bluff Dr</b>                    |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Canal Winchester</b>                                  | State<br><b>O   H</b> | Zip Code<br><b>43110</b>                | M<br><b>0   9</b> | D<br><b>2   8</b> | Y<br><b>1   0</b>                        | Amount<br><b>62.00</b> |  |
| Full Name of Contributor<br><b>Terry Green</b>                   |                       |                                         |                   |                   | Registration Number, if PAC              |                        |  |
| Street Address<br><b>4790 Crazy Horse Ln</b>                     |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>check</b> |                        |  |
| City<br><b>Westerville</b>                                       | State<br><b>O   H</b> | Zip Code<br><b>43081</b>                | M<br><b>0   9</b> | D<br><b>2   8</b> | Y<br><b>1   0</b>                        | Amount<br><b>50.00</b> |  |

\* 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)]