

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools							
Full Name of Contributor Anonymous						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash	
City	State O H	Zip Code	M 0 3	D 0 2	Y 1 0	Amount 40.00	
Full Name of Contributor Angiew Buchert						Registration Number, if PAC	
Street Address 328 Spruce Hill Dr		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 50.00	
Full Name of Contributor Robert Susey						Registration Number, if PAC	
Street Address 5794 Burnett Dr. N		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash	
City Galena	State O H	Zip Code 43021	M 0 3	D 0 2	Y 1 0	Amount 50.00	
Full Name of Contributor Brock Mitchem						Registration Number, if PAC	
Street Address 1273 Wild Horse Dr		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash	
City Grove City	State O H	Zip Code 43123	M 0 3	D 0 2	Y 1 0	Amount 50.00	
Full Name of Contributor Carol Rucker						Registration Number, if PAC	
Street Address 736 Mimosa Pl		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 50.00	
Full Name of Contributor Kathy Shephard						Registration Number, if PAC	
Street Address 856 Humbolt Dr W		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 5.00	
Full Name of Contributor Emily Edwards						Registration Number, if PAC	
Street Address 239 Jackson St		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash	
City Columbus	State O H	Zip Code 43206	M 0 3	D 0 2	Y 1 0	Amount 25.00	
Full Name of Contributor Jessie McKimmins						Registration Number, if PAC	
Street Address 495 Wickham Way		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) cash	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 30.00	

* 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)]

Page Total \$ 300.00