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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

(u co							
Name of Committee in Full							
Citizens for Quality Schools			ln.		han Jena	<u></u>	
Full Name of Contributor			Kegistra	non Num	ber, if PA	·C	
Rachal Coldwell	· 12 · · · · · ·					r . (0 1 0)	
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Chec	κ, etc.)
4906 Strand Rd			<del> y</del>			check	
City	State	Zip Code	М	D	Y	Amount	05.00
Westerville	OH	43081	0 4	2 1	1 1		25.00
Full Name of Contributor Registration Number, if PAC							
Christine Linnabary						,	
Street Address	Employer/Occup	oation/Labor Organization*				Form (Cash, Chec	k, etc.)
686 Reindeer Ln						check	
City	State	Zip Code	М	D	Y	Amount	
Gahanna	OIH	43230	0 4	2   1	1 1		25.00
Full Name of Contributor			Registra	tion Num	ber, if PA	.c	
Kelly Donaldson							
Street Address	Employer/Occup	oation/Labor Organization*				Form (Cash, Chec	k, etc.)
320 Walrock Court						check	
City	State	Zip Code	М	D	Y	Amount	
Gahanna	OH	43230	0 4	2 1	1   1		50.00
Full Name of Contributor	<u></u>			*	ber, if PA	C	
Yvonne Riego De Dios							
Street Address	Employer/Occup	pation/Labor Organization*	-			Form (Cash, Chec	k, etc.)
317 Lindenhaven Ct						check	
City	State	Zip Code	M	D	Y	Amount	
Gahanna	OIH	43230	014	211	111		20.00
Full Name of Contributor					ber, if PA	vC	
Lisa McKimmins							
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Chec	k, etc.)	
1020 North St		v				check	
City	State	Zip Code	М	D	Y	Amount	· · - · - ·
Utica Utica	OH	43080	0 4	1 .			20.00
Full Name of Contributor	<u> </u>	1 10000			ber, if PA	ιC	_0.00
Jennifer Young							
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Chec	k, etc.)
603 Brookside Dr	Employ Ottopanou Daton Organization				check		
City	State	Zip Code	М	D	Y	Amount	
Columbus	O H				1 1	1	25.00
Full Name of Contributor	10   11	TU4U7			ber, if PA		20.00
Erin Anderson			l'agistia			. =	
Street Address	Employer/Occur	oation/Labor Organization*				Form (Cash, Chec	k. etc.)
7146 Winterlock	Employer/Occupation Labor Organization			check			
City	State	Zip Code	М	D	Y	Amount	
New Albany	O H	43054	0 4	$\begin{vmatrix} 0 \\ 2 \end{vmatrix} 1$	$\begin{vmatrix} 1 \\ 1 \end{vmatrix} 1$		30.00
New Albany Full Name of Contributor		40004				\C	50.00
Susan Edwards  reet Address					k etc.)		
	Employer Occupation Baoor Organization			check			
267 Carlin Ct	State Zip Code M D Y			Amount			
Calanna	1	i -		1 .		, amount	3D DO
Gahanna	<u> </u>	43230	[0]4	1211	111		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 \$	225.00