

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for UA Schools											
Full Name of Contributor Ionnis Zissis						Registration Number, if PAC					
Street Address 3180 Ainwick Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check				
City Upper Arlington			State OH		Zip Code 43221		M 0		D 6	Y 2	Amount \$50.00
Full Name of Contributor James Regules						Registration Number, if PAC					
Street Address 2370 Beaumont Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check				
City Columbus			State OH		Zip Code 43221		M 0		D 6	Y 2	Amount \$50.00
Full Name of Contributor Schoedinger Funeral Services						Registration Number, if PAC					
Street Address 229 East State Street			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check				
City Columbus			State OH		Zip Code 43215		M 0		D 7	Y 2	Amount \$1,000.00
Full Name of Contributor Michael Fitzpatrick						Registration Number, if PAC					
Street Address 2076 Elgin Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check				
City Upper Arlington			State OH		Zip Code 43221		M 0		D 7	Y 2	Amount \$100.00
Full Name of Contributor Richard DiPaolo III						Registration Number, if PAC					
Street Address 620 Oakland Park Avenue			Employer/Occupation/Labor Organization* RDP Foodservice				Form (Cash, Check, etc.) Check				
City Columbus			State OH		Zip Code 43214		M 0		D 7	Y 2	Amount \$250.00
Full Name of Contributor Eric Menke						Registration Number, if PAC					
Street Address 2170 Yorkshire Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check				
City Columbus			State OH		Zip Code 43221		M 0		D 7	Y 2	Amount \$250.00
Full Name of Contributor Peter Hahn						Registration Number, if PAC					
Street Address 191 W. Nationwide Blvd., Suite 300			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check				
City Columbus			State OH		Zip Code 43215		M 0		D 7	Y 2	Amount \$100.00
Full Name of Contributor Mark Catalano						Registration Number, if PAC					
Street Address 1732 Essex Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check				
City Columbus			State OH		Zip Code 43221		M 0		D 7	Y 2	Amount \$20.00

* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$1,820.00**