

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for UA Schools									
Full Name of Contributor Deborah Walter						Registration Number, if PAC			
Street Address 3040 Lane Woods Court			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43221		M 0	D 7	Y 2	Amount \$50.00	
Full Name of Contributor Frederick Richard Smith						Registration Number, if PAC			
Street Address 3040 McKinley Avenue			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43204		M 0	D 7	Y 2	Amount \$100.00	
Full Name of Contributor Thomas Davis						Registration Number, if PAC			
Street Address 1922 Arlington Avenue			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43212		M 0	D 7	Y 2	Amount \$100.00	
Full Name of Contributor Sarah Trace						Registration Number, if PAC			
Street Address 2424 McCoy Road			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Upper Arlington		State OH	Zip Code 43220		M 0	D 7	Y 2	Amount \$25.00	
Full Name of Contributor Scott Lloyd						Registration Number, if PAC			
Street Address 1364 Trentwood 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 \$25.00	
Full Name of Contributor Carl Aschinger						Registration Number, if PAC			
Street Address 2252 Club Road			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43221		M 0	D 7	Y 2	Amount \$100.00	
Full Name of Contributor Burgess & Niple						Registration Number, if PAC			
Street Address 5085 Reed Road			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43220		M 0	D 7	Y 2	Amount \$500.00	
Full Name of Contributor Bricker & Eckler LLP						Registration Number, if PAC			
Street Address 100 S. Third Street, #OH821			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 0	D 7	Y 2	Amount \$250.00	

* 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 **\$1,150.00**