

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens For Southwestern City Schools									
Full Name of Contributor Philip & Sandra Warner					Registration Number, if PAC				
Street Address 1148 Heather Run			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check			
City Wilmington		State OH	Zip Code 45177		M 0	D 2	Y 08	Amount \$200.-	
Full Name of Contributor					Registration Number, if PAC				
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
City		State OH	Zip Code		M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC				
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
City		State OH	Zip Code		M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC				
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
City		State OH	Zip Code		M	D	Y	Amount	
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City		State OH	Zip Code		M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC				
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
City		State OH	Zip Code		M	D	Y	Amount	

* 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))