

Statement of Contributions Received

Prescribed by Secretary of State 03/05

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Name of Committee in Full CITIZENS FOR SOUTHWESTERN CITY SCHOOLS									
Full Name of Contributor Ernest & Vivian Hammond							Registration Number, if PAC		
Street Address 1659 Cheppewa Ct				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City		State OH		Zip Code 43123		M D Y 06 01 09		Amount \$25.-	
Full Name of Contributor Laura or Randy Watson							Registration Number, if PAC		
Street Address 1381 River Trl. Dr.				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City		State OH		Zip Code 43123		M D Y 06 01 09		Amount \$100.-	
Full Name of Contributor Michael & Melinda Garverick							Registration Number, if PAC		
Street Address 1135 White Rd				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City		State OH		Zip Code 43123		M D Y 06 01 09		Amount \$50.-	
Full Name of Contributor Mark or Nancie Bevilacqua							Registration Number, if PAC		
Street Address 2495 Linbaugh Rd-				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City		State OH		Zip Code 43123		M D Y 06 01 09		Amount \$10.-	
Full Name of Contributor Mark & Jeanette List							Registration Number, if PAC		
Street Address 4596 Bent Creek Pl.				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City		State OH		Zip Code 43123		M D Y 06 01 09		Amount \$100.-	
Full Name of Contributor Neal & Brenda Bronder							Registration Number, if PAC		
Street Address 4464 Logwood Lane				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus		State OH		Zip Code 43228		M D Y 06 01 09		Amount \$20.-	
Full Name of Contributor Kristi Lynn Jones							Registration Number, if PAC		
Street Address 4623 Edgerton Dr				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City		State OH		Zip Code 43123		M D Y 06 01 09		Amount \$25.-	
Full Name of Contributor Greg & Susan Burke							Registration Number, if PAC		
Street Address 6271 Oakhurst Dr				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City		State OH		Zip Code 43123		M D Y 06 01 09		Amount \$100.-	

* 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 **\$0.00**