

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 William & Betty Phillips						Registration Number, if PAC	
Street Address 1019 Torrey Hill Dr				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43228		M D Y Amount 0 1 2 4 12 \$ 300.-	
Full Name of Contributor Steed Hammond Paul, Inc						Registration Number, if PAC	
Street Address 82 Williams Ave				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hamilton		State OH		Zip Code 45015		M D Y Amount 0 2 0 8 12 \$ 2500.-	
Full Name of Contributor Hugh & Marsha Garside						Registration Number, if PAC	
Street Address 4631 Lombardo Street				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		M D Y Amount 0 2 0 8 12 \$ 500.-	
Full Name of Contributor Grove City Greyhound Booster Club						Registration Number, if PAC	
Street Address PO Box 338				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		M D Y Amount 0 2 0 6 12 \$ 500.-	
Full Name of Contributor Ruscilli Construction Co						Registration Number, if PAC	
Street Address 2041 Arlingate Lane				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43228		M D Y Amount 0 2 0 2 12 \$ 1000.-	
Full Name of Contributor Ed & Judy Palmer						Registration Number, if PAC	
Street Address 6392 Wahler Ct				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		M D Y Amount 0 2 0 5 12 \$ 100.-	
Full Name of Contributor Thomas & Julie Willison						Registration Number, if PAC	
Street Address 2417 Ziner Cir N				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		M D Y Amount 0 2 0 8 12 \$ 50.-	
Full Name of Contributor Mark or Amy Shaw						Registration Number, if PAC	
Street Address 4165 Haughw Rd				Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		M D Y Amount 0 2 0 8 12 \$ 50.-	

* 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 employers 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. 0(B)(4))