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Ohio Campaign Finance Report

FRANKLIN COUNTY
BOARD OF ELECTIONS

Prescribed by Secretary of State 3/05

Full Name of Committee <i>CITIZENS FOR Southwestern City Schools</i>						Registration Number, if PAC		
Full Name of Candidate								
Street Address <i>4200 Hoover Rd</i>					Office Sought		District	
City <i>Grove City</i>					State <i>OH</i>		Zip Code <i>43123</i>	
Type of Report (place X to the left of report type)	Pre-Primary		Post-Primary		Pre-General		Post-General	
	July Monthly		August Monthly		September Monthly		Termination	
Annual Year								
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Report Electronically filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Date of Election		M <i>11</i>	D <i>03</i>	Y <i>09</i>

For candidates only, during an election year: If total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box. No other forms are required at a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$ <i>19,472.14</i>
2. Total monetary contributions (From Form No. 31-A)	\$ <i>17,152.85</i>
3. Total other income (From Form No. 31-A-2)	\$ <i>—</i>
4. Total funds available (sum of lines 1, 2, 3)	\$ <i>36,624.99</i>
5. Total monetary expenditures (From Form No. 31-B)	\$ <i>28,495.63</i>
6. Balance on hand (line 4 minus line 5)	\$ <i>8,129.36</i>
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$ <i>7,959.00</i>
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$
9. Outstanding loans owed by committee (From Form No. 31-C)	\$
10. Outstanding debts owed by committee (From Form No. 31-N)	\$
11. Outstanding loans owed to committee (From Form No. 31-K)	\$
12. Value of independent expenditures made (From Form No. 31-L)	\$
13. For Electronic Filing Entities only	\$
Sum of lines 2, 7 and amount of any new loans received this period	\$

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER
COMMITTS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE

Scott Molino - Treasurer

Print Name and Title (Treasurer and Deputy Treasurer only)

Scott A. Molino
Signature

12-11-09
Date

Contribution
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Expenditure
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Other
pages 2

Total
pages 32

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						Registration Number, if PAC	
John & Linda Jones							
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
2501 Willowgate Rd						Check	
City			State	Zip Code	M	D	Y
Grove City			OH	43123	1	0	2
						Amount	
						\$ 10.-	
Full Name of Contributor						Registration Number, if PAC	
Kimberly Travis							
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
7079 DUFFY ST						Check	
City			State	Zip Code	M	D	Y
Columbus			OH	43235	1	0	2
						Amount	
						\$ 5.-	
Full Name of Contributor						Registration Number, if PAC	
Kathleen Morkan							
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
2494 Hotchkiss St						Check	
City			State	Zip Code	M	D	Y
Grove City			OH	43123	1	0	6
						Amount	
						\$ 5.-	
Full Name of Contributor						Registration Number, if PAC	
Holly Kruki							
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
2321 Spring Cress Ave						Check	
City			State	Zip Code	M	D	Y
Grove City			OH	43123	1	0	4
						Amount	
						\$ 5.-	
Full Name of Contributor						Registration Number, if PAC	
Thomas or Barbara Jech							
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
3584 Ziner Ct						Check	
City			State	Zip Code	M	D	Y
Grove City			OH	43123	1	0	2
						Amount	
						\$ 5.-	
Full Name of Contributor						Registration Number, if PAC	
Melissa & Charles Smith							
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
8070 Ohio State Lane						Check	
City			State	Zip Code	M	D	Y
Lancaster			OH	43130	1	0	5
						Amount	
						\$ 100.-	
Full Name of Contributor						Registration Number, if PAC	
Julie & David Ison							
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
66 Bartholomew Blvd						Check	
City			State	Zip Code	M	D	Y
Powell			OH	43065	1	0	5
						Amount	
						\$ 25.-	
Full Name of Contributor						Registration Number, if PAC	
Eric & Denise Diaz							
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
1882 St. Lawrence Dr						Check	
City			State	Zip Code	M	D	Y
Columbus			OH	43223	1	0	7
						Amount	
						\$ 10.-	

* 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)]

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 David + Denise Cole				Registration Number, if PAC		
Street Address 8818 Chateau Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Pickerington	State OH	Zip Code 43147	M 10	D 06	Y 09	Amount 10.-
Full Name of Contributor Jessica Hampson				Registration Number, if PAC		
Street Address 912 Sheridan Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	M 10	D 02	Y 09	Amount 30.-
Full Name of Contributor Casey + Marsha Fowler				Registration Number, if PAC		
Street Address 1427 Tall Meadows Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43223	M 10	D 13	Y 09	Amount 10.-
Full Name of Contributor Grove City Visitors & Convention Bureau				Registration Number, if PAC		
Street Address 4052 Broadway		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Grove City	State OH	Zip Code 43123	M 10	D 23	Y 09	Amount 2500.-
Full Name of Contributor Ronald + Martha Pfeifer				Registration Number, if PAC		
Street Address 2850 Wyrbridge Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Grove City	State OH	Zip Code 43123	M 10	D 26	Y 09	Amount 100.-
Full Name of Contributor Patricia Benedik				Registration Number, if PAC		
Street Address 230 Players Club Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Commerical Point	State OH	Zip Code 43116	M 10	D 22	Y 09	Amount 50.-
Full Name of Contributor Monterey PTA				Registration Number, if PAC		
Street Address 2584 Dennis Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Grove City	State OH	Zip Code 43123	M 10	D 13	Y 09	Amount 200.-
Full Name of Contributor Gary Leaswe				Registration Number, if PAC		
Street Address 2485 Milligan Grove		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Grove City	State OH	Zip Code 43123	M 10	D 27	Y 09	Amount 500.-

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Statement of Contributions Received

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Name of Committee in Full CITIZENS FOR SOUTHWESTERN CITY SCHOOLS									
Full Name of Contributor S.A. & T. Howlett						Registration Number, if PAC			
Street Address 5410 Bluebell Ct.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City		State OH	Zip Code 43123		M 10	D 19	Y 09	Amount 30.-	
Full Name of Contributor Jeanne Lemmon Skinner						Registration Number, if PAC			
Street Address 1276 Churchbell Way			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43235		M 10	D 16	Y 09	Amount 50.-	
Full Name of Contributor Nancy Hampson & John Sheldon Hampson						Registration Number, if PAC			
Street Address 3322 Grove Park Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Grove City		State OH	Zip Code 43123		M 10	D 20	Y 09	Amount 25.-	
Full Name of Contributor James & Ewice Habermehl						Registration Number, if PAC			
Street Address 6117 Red Winesap Way			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Dublin		State OH	Zip Code 43016		M 10	D 12	Y 09	Amount 47.-	
Full Name of Contributor Finland Elementary PTA						Registration Number, if PAC			
Street Address 1835 Finland Ave			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43223		M 10	D 23	Y 09	Amount 100.-	
Full Name of Contributor Country Classic Hardwood Floors LLC						Registration Number, if PAC			
Street Address 9070 Ohio State Ln			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Lancaster		State OH	Zip Code 43130		M 10	D 15	Y 09	Amount 100.-	
Full Name of Contributor Oakhurst Country Club						Registration Number, if PAC			
Street Address 3223 Norton Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Grove City		State OH	Zip Code 43123		M 10	D 25	Y 09	Amount 330.-	
Full Name of Contributor Mr. Bosworth						Registration Number, if PAC			
Street Address 5132 Sandpiper Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash		
City Grove City		State OH	Zip Code 43123		M	D	Y	Amount \$12.-	

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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				Registration Number, if PAC			
Darby Woods Elementary PTA							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
255 Westwoods Blvd					Check		
City	State	Zip Code	M	D	Y	Amount	
Galloway	OH	43119	1	0	22	09	550.-
Full Name of Contributor				Registration Number, if PAC			
F. Derek Fitzer							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
194 Olentangy Street					Check		
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43202	1	0	27	09	10.-
Full Name of Contributor				Registration Number, if PAC			
Deborah Carpenter							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
4694 Cadmus Dr					Check		
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43228	1	0	25	09	50.-
Full Name of Contributor				Registration Number, if PAC			
William & Betty Phillis							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
1019 Torrey Hill Dr					Check		
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43228	1	0	12	09	100.-
Full Name of Contributor				Registration Number, if PAC			
Zoraba Ross							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
1822 Fairhaven Rd					Check		
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43229	1	0	26	09	50.-
Full Name of Contributor				Registration Number, if PAC			
J.C. Sommer PTA							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
3055 Kingston Ave					Check		
City	State	Zip Code	M	D	Y	Amount	
Grove City	OH	43123	1	0	15	09	250.-
Full Name of Contributor				Registration Number, if PAC			
James & Tammy French							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
6252 Buckeye Parkway					Check		
City	State	Zip Code	M	D	Y	Amount	
Grove City	OH	43123	1	0	16	09	1000.-
Full Name of Contributor				Registration Number, if PAC			
Robert & Barbara Lewis							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
4434 Clark Pl					Check		
City	State	Zip Code	M	D	Y	Amount	
Grove City	OH	43123	1	0	08	09	200.-

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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				Registration Number, if PAC			
Norton Middle School PTSA							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
215 Norton Rd					Check		
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43228	1	0	2009	60.-	
Full Name of Contributor				Registration Number, if PAC			
Larry Waller							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
941 Chatham Ln Ste 212					Check		
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43221	1	0	2709	200.-	
Full Name of Contributor				Registration Number, if PAC			
James & Jennifer DeFrancesco							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
642 Streamwater Drive					Check		
City	State	Zip Code	M	D	Y	Amount	
Blacklick	OH	43004	1	0	1709	47.-	
Full Name of Contributor				Registration Number, if PAC			
Michael T. Crabtree							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
5911 Rings Ave					Check		
City	State	Zip Code	M	D	Y	Amount	
Grove City	OH	43123	1	0	2009	47.-	
Full Name of Contributor				Registration Number, if PAC			
Bruce or Carol Searles							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
3552 Devin Rd					Check		
City	State	Zip Code	M	D	Y	Amount	
Grove City	OH	43123	1	0	2409	47.-	
Full Name of Contributor				Registration Number, if PAC			
Paul & Jane Denton							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
6141 Lambert Rd					Check		
City	State	Zip Code	M	D	Y	Amount	
Orient	OH	43146	1	0	2709	20.-	
Full Name of Contributor				Registration Number, if PAC			
David or Brenda Hellard							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
3151 orders Road					Check		
City	State	Zip Code	M	D	Y	Amount	
Grove City	OH	43123	1	0	2609	47.-	
Full Name of Contributor				Registration Number, if PAC			
James & Cynthia Grube							
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
13905 Whispering Court					Check		
City	State	Zip Code	M	D	Y	Amount	
Pickerington	OH	43147	1	0	2609	50.-	

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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 Diane or Mark Mankins					Registration Number, if PAC		
Street Address 85 Freeway Dr. SW		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Reynoldsburg	State OH	Zip Code 43068	M 11	D 02	Y 09	Amount 47.-	
Full Name of Contributor Nancy L. Youse					Registration Number, if PAC		
Street Address 6019 Carmell Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43228	M 11	D 01	Y 09	Amount 50.-	
Full Name of Contributor Garvericks INC					Registration Number, if PAC		
Street Address 1910 Strington Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City	State OH	Zip Code 43123	M 10	D 29	Y 09	Amount 123.⁵⁵	
Full Name of Contributor Big Run Bluffs					Registration Number, if PAC		
Street Address 3937 Tarrington Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43220	M 11	D 01	Y 09	Amount 1500.-	
Full Name of Contributor Muscilli Construction					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 10	D 29	Y 09	Amount 1000.-	
Full Name of Contributor Southwestern Council of PTAs					Registration Number, if PAC		
Street Address 1231 Pinnacle Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43204	M 11	D 04	Y 09	Amount 160.-	
Full Name of Contributor Galloway Ridge PTA Intermediate School					Registration Number, if PAC		
Street Address 122 Galloway Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Galloway	State OH	Zip Code 43119	M 11	D 04	Y 09	Amount 250.-	
Full Name of Contributor Brookpark Middle School PTSA					Registration Number, if PAC		
Street Address 2803 Southwest Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Grove City	State OH	Zip Code 43123	M 11	D 04	Y 09	Amount 190.-	

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Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>CITIZENS FOR SOUTHWESTERN CITY SCHOOLS</i>							
Full Name of Contributor <i>Howard</i>					Registration Number, if PAC		
Street Address <i>2688 Brinkman Dr</i>			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>Cash</i>		
City <i>Grove City</i>		State <i>OH</i>	Zip Code <i>43123</i>	M <i>11</i>	D <i>04</i>	Y <i>09</i>	Amount <i>10.-</i>
Full Name of Contributor <i>North Franklin Elementary PTA</i>							
Street Address <i>1122 North Hague Ave</i>			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>		
City <i>Columbus</i>		State <i>OH</i>	Zip Code <i>43204</i>	M <i>11</i>	D <i>13</i>	Y <i>09</i>	Amount <i>180.-</i>
Full Name of Contributor <i>East Franklin PTA</i>							
Street Address <i>1955 Richmond Rd.</i>			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>		
City <i>Columbus</i>		State <i>OH</i>	Zip Code <i>43223</i>	M <i>10</i>	D <i>27</i>	Y <i>09</i>	Amount <i>50.-</i>
Full Name of Contributor <i>The Darbydale PTA</i>							
Street Address <i>7000 London Groveport Rd</i>			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>		
City <i>Grove City</i>		State <i>OH</i>	Zip Code <i>43123</i>	M <i>10</i>	D <i>23</i>	Y <i>09</i>	Amount <i>500.-</i>
Full Name of Contributor <i>CORPAC</i>							
Street Address <i>2700 Airport Dr</i>			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>		
City <i>Columbus</i>		State <i>OH</i>	Zip Code <i>43219</i>	M <i>10</i>	D <i>26</i>	Y <i>09</i>	Amount <i>1000.-</i>
Full Name of Contributor <i>Clinton & Jennifer Rardon</i>							
Street Address <i>2308 Josephine Circle</i>			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>		
City <i>Grove City</i>		State <i>OH</i>	Zip Code <i>43123</i>	M <i>10</i>	D <i>27</i>	Y <i>09</i>	Amount <i>100.-</i>
Full Name of Contributor <i>Michael Lee & Kimberly Kay Scott</i>							
Street Address <i>4101 Brookgrove Dr</i>			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>		
City <i>Grove City</i>		State <i>OH</i>	Zip Code <i>43123</i>	M <i>10</i>	D <i>19</i>	Y <i>09</i>	Amount <i>50.-</i>
Full Name of Contributor <i>Susan Borders</i>							
Street Address <i>325 Markley Rd.</i>			Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>check</i>		
City <i>London</i>		State <i>OH</i>	Zip Code <i>43140</i>	M <i>10</i>	D <i>18</i>	Y <i>09</i>	Amount <i>50.-</i>

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Statement of Contributions Received

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Name of Committee in Full Citizens For Southwestern City Schools						
Full Name of Contributor Jerry or Carol Hunt				Registration Number, if PAC		
Street Address 6470 Buckeye Path Dr S		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 10	D 08	Y 09	Amount 20.-
Full Name of Contributor Rhea & Brad Skeen				Registration Number, if PAC		
Street Address 1969 Sunny Rock Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 10	D 18	Y 09	Amount 10.-
Full Name of Contributor Park Street Intermediate PTA				Registration Number, if PAC		
Street Address 3205 Park Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 11	D 10	Y 09	Amount 240.-
Full Name of Contributor Grove City High School Band Boosters				Registration Number, if PAC		
Street Address P.O. Box 403		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 10	D 26	Y 09	Amount 2000.-
Full Name of Contributor Finland Middle School PTA				Registration Number, if PAC		
Street Address 1825 Finland Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43223	M 10	D 30	Y 09	Amount 50.-
Full Name of Contributor Marcia Schaefer & Ted Schaefer Jr.				Registration Number, if PAC		
Street Address 3069 Carisbrook Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43221	M 10	D 01	Y 09	Amount 50.-
Full Name of Contributor John & Dawn Scott				Registration Number, if PAC		
Street Address 3016 Olson Place		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Grove City	State OH	Zip Code 43123	M 10	D 30	Y 09	Amount 10.-
Full Name of Contributor Stiles Elementary PTA				Registration Number, if PAC		
Street Address 4700 Stiles Avenue		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43228	M 10	D 30	Y 09	Amount 60.-

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Statement of Contributions Received

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Name of Committee in Full					
Citizens For Southwestern City Schools					
Full Name of Contributor Westland High School Athletic Boosters				Registration Number, if PAC	
Street Address 145 Galloway Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Galloway	State OH	Zip Code 43119	M 1	D 1	Y 09
			Amount 230.-		
Westland Area Business Association					
Full Name of Contributor Westland Area Business Association				Registration Number, if PAC	
Street Address P.O. Box 282035		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43228	M 1	D 2	Y 09
			Amount 2235.-		
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		
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		

* 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)]

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full CITIZENS For Southwestern City Schools			
Full Name of Contributor Phil Warner		Employer, Occupation, Labor Organization*	
Street Address 1148 Heather Run		Description of Item or Service Postage	
City Wilmington		State OH	Zip Code 45177
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor Ohio Association of Public School Employees		Employer, Occupation, Labor Organization*	
Street Address 6805 Oak Creek Drive		Description of Item or Service Postage	
City Columbus		State OH	Zip Code 43229
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor William Wise		Employer, Occupation, Labor Organization*	
Street Address 2458 Hickorybend Ct		Description of Item or Service Postage	
City Grove City		State OH	Zip Code 43123
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor Ohio Association of Public School Employees		Employer, Occupation, Labor Organization*	
Street Address 6805 Oak Creek Dr		Description of Item or Service	
City Columbus		State OH	Zip Code 43229
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and 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)]

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full										
Citizens For Southwestern City Schools										
To Whom Paid							M	D	Y	Amount
United States Postal Service							10	23	09	\$3687.50
Address				Purpose						
Post Office of Mailing				Postage						
City			State	Zip Code		Check Number				
Columbus			OH	43218		881				
To Whom Paid							M	D	Y	Amount
Cromwell & Company							10	28	09	\$384.56
Address				Purpose						
850 Eaglenest Ave				Design/Print/mail						
City			State	Zip Code		Check Number				
Akron			OH	44303		882				
To Whom Paid							M	D	Y	Amount
Cromwell & Company							10	28	09	\$10662.76
Address				Purpose						
850 Eaglenest Ave				Postage						
City			State	Zip Code		Check Number				
Akron			OH	44303		883				
To Whom Paid							M	D	Y	Amount
H.R.P.E. LLC							10	30	09	\$700.00
Address				Purpose						
3971 Broadway				T-Shirts						
City			State	Zip Code		Check Number				
Grove City			OH	43123		884				
To Whom Paid							M	D	Y	Amount
China Bell							11	05	09	\$591.74
Address				Purpose						
1947 Stringtown Rd				Reimbursement						
City			State	Zip Code		Check Number				
Grove City			OH	43123		885				
To Whom Paid							M	D	Y	Amount
Kim Allmon							11	05	09	\$155.33
Address				Purpose						
2870 Wynridge Rd				Reimbursement For Campaign Supplies						
City			State	Zip Code		Check Number				
Grove City			OH	43123		886				
To Whom Paid							M	D	Y	Amount
Burgess & Burgess Strategists							11	05	09	\$10,000.00
Address				Purpose						
26100 Lake Shore Blvd				Consulting Fee						
City			State	Zip Code		Check Number				
Cleveland			OH	44132		887				
To Whom Paid							M	D	Y	Amount
Mary Mulvaney							11	06	09	\$264.58
Address				Purpose						
9739 Hunting Creek				Ribbons						
City			State	Zip Code		Check Number				
Grove City			OH	43123		888				

