

FILED

Ohio Campaign Finance Report

10 APR 20 PM 1:20

Prescribed by Secretary of State 3/05

FRANKLIN COUNTY
BOARD OF ELECTIONS

Full Name of Committee Citizens for Quality Schools							Registration Number, if PAC		
Full Name of Candidate									
Street Address 871 Poppy Hills Dr						Office Sought		District	
City Blacklick						State O H		Zip Code 43004	
Type of Report (place X to the left of report type)	<input checked="" type="checkbox"/>	Pre-Primary		Post-Primary		Pre-General		Post-General	Annual Year
		July Monthly		August Monthly		September Monthly		Termination	Semiannual
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	D	Y	
						0	5	0	4 1 0

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	\$ 0.00
2. Total monetary contributions (From Form No. 31-A)	\$ 62,774.58
3. Total other income (From Form No. 31-A-2)	\$
4. Total funds available (sum of lines 1, 2, 3)	\$ 62,774.58
5. Total monetary expenditures (From Form No. 31-B)	\$ 39,487.36
6. Balance on hand (line 4 minus line 5)	\$ 23,287.22
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$ 5,406.38
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-U)	\$
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 COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE

W. Michael Fritz, Treasurer

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

Date

W. Michael Fritz
4/20/10

Contribution pages 81

Expenditure pages 2

Other pages 18

Total pages 101

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools						
Full Name of Contributor Scott, Criven & Wahoff, LLP				Registration Number, if PAC		
Street Address 50 W Broad Street, Ste 2500		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43215	M 0 2	D 0 1	Y 1 0	Amount 3,000.00
Full Name of Contributor Heartland Bank				Registration Number, if PAC		
Street Address 850 North Hamilton Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 2	D 0 8	Y 1 0	Amount 2,500.00
Full Name of Contributor Kathleen Mullooly-Erhard				Registration Number, if PAC		
Street Address 648 Howell Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Newark	State O H	Zip Code 43055	M 0 2	D 0 9	Y 1 0	Amount 110.00
Full Name of Contributor Dale Foor				Registration Number, if PAC		
Street Address 626 Reindeer Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 2	D 0 9	Y 1 0	Amount 50.00
Full Name of Contributor Mark R Grunkemeyer				Registration Number, if PAC		
Street Address 235 Benton Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43230	M 0 2	D 0 9	Y 1 0	Amount 50.00
Full Name of Contributor Robert McCafferty				Registration Number, if PAC		
Street Address 2755 Northmont Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43004	M 0 2	D 0 9	Y 1 0	Amount 100.00
Full Name of Contributor various individuals less than \$25				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash	
City	State	Zip Code	M 0 2	D 0 9	Y 1 0	Amount 40.00
Full Name of Contributor Mark White				Registration Number, if PAC		
Street Address 1744 Harrison Pond Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City New Albany	State O H	Zip Code 43054	M 0 2	D 2 3	Y 1 0	Amount 200.00

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 appear. [R.C. 3517.10(B)(4)]

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools						
Full Name of Contributor Brad Barboza				Registration Number, if PAC		
Street Address 9154 Waynebrown Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Powell	State O H	Zip Code 43065	M 0 2	D 2 3	Y 1 0	Amount 120.00
Full Name of Contributor Roben Frentzel				Registration Number, if PAC		
Street Address 860 Aries Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 2	D 2 3	Y 1 0	Amount 100.00
Full Name of Contributor Robin Schmidt				Registration Number, if PAC		
Street Address 5125 Royal Country Down		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Westerville	State O H	Zip Code 43082	M 0 2	D 2 3	Y 1 0	Amount 200.00
Full Name of Contributor Tom Martin				Registration Number, if PAC		
Street Address 6397 Headley Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 2	D 2 3	Y 1 0	Amount 100.00
Full Name of Contributor Scott Schmidt				Registration Number, if PAC		
Street Address 699 Tim Tam Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 2	D 2 3	Y 1 0	Amount 200.00
Full Name of Contributor Sue Everhart				Registration Number, if PAC		
Street Address 6500 Eagle Point Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43004	M 0 2	D 2 3	Y 1 0	Amount 50.00
Full Name of Contributor Matthew Cygnor				Registration Number, if PAC		
Street Address 4228 Clark Shaw Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Powell	State O H	Zip Code 43065	M 0 2	D 2 3	Y 1 0	Amount 130.00
Full Name of Contributor Rae Harriott-White				Registration Number, if PAC		
Street Address 1744 Harrison Pond Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City New Albany	State O H	Zip Code 43054	M 0 2	D 2 3	Y 1 0	Amount 100.00

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Statement of Contributions Received

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Name of Committee in Full Citizens For Quality Schools						
Full Name of Contributor Janet Snedaker				Registration Number, if PAC		
Street Address 814 Black Gold Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0	D 2	Y 2 3	Amount 25.00
Full Name of Contributor Linda Green				Registration Number, if PAC		
Street Address 3294 Aronimink Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Pickerington	State O H	Zip Code 43147	M 0	D 2	Y 2 3	Amount 40.00
Full Name of Contributor Sherri Zynda				Registration Number, if PAC		
Street Address 8011 Bellow Park Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Reynoldsburg	State O H	Zip Code 43068	M 0	D 2	Y 2 6	Amount 100.00
Full Name of Contributor Brooke Menduni				Registration Number, if PAC		
Street Address 2432 Merbrook Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43235	M 0	D 2	Y 2 6	Amount 73.00
Full Name of Contributor John Rathburn				Registration Number, if PAC		
Street Address 1293 Lindenwald Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City New Albany	State O H	Zip Code 43054	M 0	D 2	Y 2 6	Amount 100.00
Full Name of Contributor Ralph Walton				Registration Number, if PAC		
Street Address 6057 Nicholas Glen		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43213	M 0	D 2	Y 2 6	Amount 100.00
Full Name of Contributor Brett Harmon				Registration Number, if PAC		
Street Address 230 Farm Creek Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0	D 2	Y 2 6	Amount 110.00
Full Name of Contributor Gregg Morris				Registration Number, if PAC		
Street Address 7680 Clear Creek Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43004	M 0	D 2	Y 2 5	Amount 200.00

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Name of Committee in Full Citizens for Quality Schools						
Full Name of Contributor Barbara Murdock				Registration Number, if PAC		
Street Address 1899 Lockmere Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Reynoldsburg	State O H	Zip Code 43068	M 0	D 2	Y 2 5	Amount 100.00
Full Name of Contributor Danita Roush				Registration Number, if PAC		
Street Address 6577 Saylor St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Canal Winchester	State O H	Zip Code 43110	M 0	D 2	Y 2 5	Amount 60.00
Full Name of Contributor Thomas Owens				Registration Number, if PAC		
Street Address 399 Middleground Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Pataskala	State O H	Zip Code 43062	M 0	D 2	Y 2 5	Amount 70.00
Full Name of Contributor Richard Oxley				Registration Number, if PAC		
Street Address 253 E Shrock Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Westerville	State O h	Zip Code 43081	M 0	D 2	Y 2 5	Amount 116.00
Full Name of Contributor Sue Weiging				Registration Number, if PAC		
Street Address 7945 Hickson Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43004	M 0	D 2	Y 2 6	Amount 100.00
Full Name of Contributor Bryan Carley				Registration Number, if PAC		
Street Address 104 Mill St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0	D 3	Y 0 1	Amount 100.00
Full Name of Contributor Mark Semer				Registration Number, if PAC		
Street Address 38 West Pacemont		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43202	M 0	D 3	Y 0 2	Amount 150.00
Full Name of Contributor Susan L Johnston				Registration Number, if PAC		
Street Address 4365 Braunton Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43220	M 0	D 3	Y 0 2	Amount 75.00

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Name of Committee in Full									
Citizens for Quality Schools									
Full Name of Contributor					Registration Number, if PAC				
Michael Russell									
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
14788 George Ice Rd							check		
City		State		Zip Code		M	D	Y	Amount
Glenford		O H		43739		0 3	0 2	1 0	60.00
Full Name of Contributor					Registration Number, if PAC				
Kay Melaragno									
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
3098 Mann Rd							check		
City		State		Zip Code		M	D	Y	Amount
Blacklick		O H		43004		0 3	0 2	1 0	50.00
Full Name of Contributor					Registration Number, if PAC				
Mary Otting									
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
849 Hensel Woods Ct							check		
City		State		Zip Code		M	D	Y	Amount
Gahanna		O H		43230		0 3	0 2	1 0	70.00
Full Name of Contributor					Registration Number, if PAC				
Justin Sanford									
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
1748 Harrison Pond Rd							check		
City		State		Zip Code		M	D	Y	Amount
New Albany		O H		43054		0 3	0 2	1 0	200.00
Full Name of Contributor					Registration Number, if PAC				
Mark Kinser									
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
5029 Sugar Plum St							check		
City		State		Zip Code		M	D	Y	Amount
Gahanna		O H		43230		0 3	0 2	1 0	45.00
Full Name of Contributor					Registration Number, if PAC				
Ginamarie Pagani									
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
7634 Schneider Way							check		
City		State		Zip Code		M	D	Y	Amount
Blacklick		O H		43004		0 3	0 2	1 0	10.00
Full Name of Contributor					Registration Number, if PAC				
Kathleen Cataldi									
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
343 Vista Dr							check		
City		State		Zip Code		M	D	Y	Amount
Gahanna		O H		43230		0 3	0 2	1 0	20.00
Full Name of Contributor					Registration Number, if PAC				
Virginia Daugherty									
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
1221 Wedgefield Ln							check		
City		State		Zip Code		M	D	Y	Amount
New Albany		O H		43054		0 3	0 2	1 0	50.00

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Statement of Contributions Received

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Name of Committee in Full Citizens for Quality Schools						
Full Name of Contributor Jody Grieger				Registration Number, if PAC		
Street Address 3744 Timberland Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 20.00
Full Name of Contributor Kamie Guzy				Registration Number, if PAC		
Street Address 7881 Danbridge Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Westerville	State O H	Zip Code 43062	M 0 3	D 0 2	Y 1 0	Amount 35.00
Full Name of Contributor John Marette				Registration Number, if PAC		
Street Address 3552 Chowning Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43220	M 0 3	D 0 2	Y 1 0	Amount 30.00
Full Name of Contributor Amy Clark				Registration Number, if PAC		
Street Address 373 Dunbarton Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43220	M 0 3	D 0 2	Y 1 0	Amount 20.00
Full Name of Contributor Linda Smith				Registration Number, if PAC		
Street Address 10084 Houndsdale Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Pickerington	State O H	Zip Code 43147	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Sandra Nelson Hall				Registration Number, if PAC		
Street Address 516 Clark State Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 20.00
Full Name of Contributor Debra Kuskowski				Registration Number, if PAC		
Street Address 271 Broadleigh Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43209	M 0 3	D 0 2	Y 1 0	Amount 10.00
Full Name of Contributor Deborah Hoffman				Registration Number, if PAC		
Street Address 8271 Turret Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43004	M 0 3	D 0 2	Y 1 0	Amount 20.00

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Statement of Contributions Received

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Name of Committee in Full Citizens for Quality Schools						
Full Name of Contributor Sondra Riebel				Registration Number, if PAC		
Street Address 263 Brueghel		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43004	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Kay Tomesek				Registration Number, if PAC		
Street Address 626 Bay Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Westerville	State O H	Zip Code 43082	M 0 3	D 0 2	Y 1 0	Amount 87.00
Full Name of Contributor Jennifer Smith				Registration Number, if PAC		
Street Address 14288 Jug St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Johnstown	State O H	Zip Code 43031	M 0 3	D 0 2	Y 1 0	Amount 61.00
Full Name of Contributor Megan Poff				Registration Number, if PAC		
Street Address 5299 Knight St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Groveport	State O H	Zip Code 43125	M 0 3	D 0 2	Y 1 0	Amount 40.00
Full Name of Contributor Amanda Collier				Registration Number, if PAC		
Street Address 916 Gray Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Pickerington	State O H	Zip Code 43137	M 0 3	D 0 2	Y 1 0	Amount 100.00
Full Name of Contributor Linda Jenks				Registration Number, if PAC		
Street Address 3816 Bentworth Ln		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 25.00
Full Name of Contributor Jeannette Frioni				Registration Number, if PAC		
Street Address 1934 Rockdale		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43229	M 0 3	D 0 2	Y 1 0	Amount 87.00
Full Name of Contributor Greg Telecsan				Registration Number, if PAC g		
Street Address 8445 Kingsley Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Reynoldsburg	State O H	Zip Code 43068	M 0 3	D 0 2	Y 1 0	Amount 80.00

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools						
Full Name of Contributor Rachel Micheli				Registration Number, if PAC		
Street Address 220 W Willow Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Zanesville	State O H	Zip Code 43701	M 0 3	D 0 2	Y 1 0	Amount 40.00
Full Name of Contributor Kristi Griffiths				Registration Number, if PAC		
Street Address 120 Mendolin Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Powell	State O H	Zip Code 43065	M 0 3	D 0 2	Y 1 0	Amount 89.00
Full Name of Contributor Karie Gregory				Registration Number, if PAC		
Street Address 3547 Babbitt Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43004	M 0 3	D 0 2	Y 1 0	Amount 100.00
Full Name of Contributor Denise Wolfe				Registration Number, if PAC		
Street Address 3774 Ashlon Woods Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 44.00
Full Name of Contributor Myra Littleton				Registration Number, if PAC		
Street Address 627 Green Cook Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Sunbury	State O H	Zip Code 43074	M 0 3	D 0 2	Y 1 0	Amount 100.00
Full Name of Contributor Patricia Angusgordon				Registration Number, if PAC		
Street Address 6021 Grand Stand Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Westerville	State O H	Zip Code 43081	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Stacy Carter				Registration Number, if PAC		
Street Address 5346 Ambrosia Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43235	M 0 3	D 0 2	Y 1 0	Amount 55.00
Full Name of Contributor Nicole Kelley				Registration Number, if PAC		
Street Address 1175 Michigan Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43201	M 0 3	D 0 2	Y 1 0	Amount 55.00

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Name of Committee in Full Citizens for Quality Schools						
Full Name of Contributor Karen McDonnell Brown				Registration Number, if PAC		
Street Address 858 S Cassingham Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43209	M 0 3	D 0 2	Y 1 0	Amount 87.00
Full Name of Contributor Paige Harding				Registration Number, if PAC		
Street Address 741 McDonell Pl		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 71.00
Full Name of Contributor Michael Cebriak				Registration Number, if PAC		
Street Address 361 Westerdale		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 80.00
Full Name of Contributor Kristen Pietro				Registration Number, if PAC		
Street Address 102 Brookhill Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Wendy Fafata-Roberts				Registration Number, if PAC		
Street Address 319 Lyncroft Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 60.00
Full Name of Contributor Michael Shade				Registration Number, if PAC		
Street Address 2323 Reynoldsburg NA Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 80.00
Full Name of Contributor Jason Swinehart				Registration Number, if PAC		
Street Address 4718 Tatersall Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 20.00
Full Name of Contributor Dona Montgomery				Registration Number, if PAC		
Street Address 122 Misty Oak Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 2,500.00

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools						
Full Name of Contributor Elizabeth Miller				Registration Number, if PAC		
Street Address 7796 Worley Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43004	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Linda Reasoner				Registration Number, if PAC		
Street Address 437 Bluestem Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Connie Phillips				Registration Number, if PAC		
Street Address 5427 Coral Berry Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43235	M 0 3	D 0 2	Y 1 0	Amount 80.00
Full Name of Contributor Patricia King				Registration Number, if PAC		
Street Address 9193 Firstgate Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Reynoldsburg	State O H	Zip Code 43068	M 0 3	D 0 2	Y 1 0	Amount 70.00
Full Name of Contributor Mark Miller				Registration Number, if PAC		
Street Address 608 Sycamore Mill Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 80.00
Full Name of Contributor Ryan Lockwood				Registration Number, if PAC		
Street Address 342 Letchworht Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43204	M 0 3	D 0 2	Y 1 0	Amount 60.00
Full Name of Contributor Rodney Tolliver				Registration Number, if PAC		
Street Address 3627 Olentangy Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43214	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Lee Hirtle				Registration Number, if PAC		
Street Address 6403 Walnut St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Westerville	State O H	Zip Code 43081	M 0 3	D 0 2	Y 1 0	Amount 67.55

* 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 appear. [R.C. 3517.10(B)(4)]

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools						
Full Name of Contributor Marcia Sweet				Registration Number, if PAC		
Street Address 1270 Venetian Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 70.00
Full Name of Contributor Linda Hoffman				Registration Number, if PAC		
Street Address 1224 Darcann Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43220	M 0 3	D 0 2	Y 1 0	Amount 100.00
Full Name of Contributor Kimberly Thomas				Registration Number, if PAC		
Street Address 6548 Warriner Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Canal Winchester	State O H	Zip Code 43110	M 0 3	D 0 2	Y 1 0	Amount 80.00
Full Name of Contributor Cheryl Ramey				Registration Number, if PAC		
Street Address 85 Broodsedge Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Pataskala	State O H	Zip Code 43062	M 0 3	D 0 2	Y 1 0	Amount 75.00
Full Name of Contributor Bonita Azeltine				Registration Number, if PAC		
Street Address 564 Clotts Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 35.00
Full Name of Contributor Benjamin Cullivan				Registration Number, if PAC		
Street Address 428 Preservation Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Dwayne Marshall				Registration Number, if PAC		
Street Address 7843 Fairfax Loop Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43003	M 0 3	D 0 2	Y 1 0	Amount 75.00
Full Name of Contributor Kellie Bommer				Registration Number, if PAC		
Street Address 925 Venetian Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 38.40

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools							
Full Name of Contributor Besy Coccia					Registration Number, if PAC		
Street Address 822 DeerRun			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna		State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 52.00
Full Name of Contributor Ryan Beck					Registration Number, if PAC		
Street Address 6695 Hayhurst St			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Worthington		State O H	Zip Code 43085	M 0 3	D 0 2	Y 1 0	Amount 48.00
Full Name of Contributor Tracy Dyckman					Registration Number, if PAC		
Street Address 5188 Dry Creek			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Dublin		State O H	Zip Code 43016	M 0 3	D 0 2	Y 1 0	Amount 45.00
Full Name of Contributor Jennifer Candor					Registration Number, if PAC		
Street Address 80 Southwind Drive			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna		State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 54.00
Full Name of Contributor Philip Peters					Registration Number, if PAC		
Street Address 5273 Mason Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Canal Winchester		State O H	Zip Code 43110	M 0 3	D 0 2	Y 1 0	Amount 75.00
Full Name of Contributor Karen Winkle					Registration Number, if PAC		
Street Address 201 Farm Creek Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna		State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 60.00
Full Name of Contributor Chris Schwinnen					Registration Number, if PAC		
Street Address 2458 Charles Mill Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Hilliard		State O H	Zip Code 43026	M 0 3	D 0 2	Y 1 0	Amount 54.00
Full Name of Contributor Margaret Scott					Registration Number, if PAC		
Street Address 195 Rivers Edge Way			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna		State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 60.00

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools							
Full Name of Contributor Catherine Morrisson					Registration Number, if PAC		
Street Address 1150 Riva Ridge Blvd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna		State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Gary Ingo					Registration Number, if PAC		
Street Address 1990 Araphaho Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Circleville		State O H	Zip Code 43113	M 0 3	D 0 2	Y 1 0	Amount 70.00
Full Name of Contributor Lillian Acker					Registration Number, if PAC		
Street Address 1081 Arcaro			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna		State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 82.00
Full Name of Contributor Linda Shannon					Registration Number, if PAC		
Street Address 6505 Meadowbrook Cir			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Worthington		State O H	Zip Code 43085	M 0 3	D 0 2	Y 1 0	Amount 100.00
Full Name of Contributor David Purdy					Registration Number, if PAC		
Street Address 7808 Industrial Parkway			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Plain City		State O H	Zip Code 43064	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Johnel Gore					Registration Number, if PAC		
Street Address 6314 Downwing Ln			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus		State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 69.00
Full Name of Contributor Charles Banks					Registration Number, if PAC		
Street Address 7988 Champaign Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick		State O H	Zip Code 43004	M 0 3	D 0 2	Y 1 0	Amount 57.00
Full Name of Contributor Dana Johnson					Registration Number, if PAC		
Street Address 1039 Reece Ridge Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna		State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 90.00

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality School						
Full Name of Contributor Sherry Owens				Registration Number, if PAC		
Street Address 92 Prestwicke Mill		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43004	M 0 3	D 0 2	Y 1 0	Amount 70.00
Full Name of Contributor Jeffrey Lawless				Registration Number, if PAC		
Street Address 244 W Henderson Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43214	M 00 3	D 0 2	Y 1 0	Amount 47.00
Full Name of Contributor Jack Kruse				Registration Number, if PAC		
Street Address 8320 Schleppi Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Westerville	State O H	Zip Code 43081	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Jonna Gordyan				Registration Number, if PAC		
Street Address 515 Donor Pond Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43004	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Deborah Jados				Registration Number, if PAC		
Street Address 8306 Altair St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43240	M 0 3	D 0 2	Y 1 0	Amount 30.00
Full Name of Contributor Donja Bridges				Registration Number, if PAC		
Street Address 2788 E Livingston Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43209	M 0 3	D 0 2	Y 1 0	Amount 25.00
Full Name of Contributor Marc Ross				Registration Number, if PAC		
Street Address 897 Plum Ridge		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43213	M 0 3	D 0 2	Y 1 0	Amount 65.00
Full Name of Contributor Susan Moore				Registration Number, if PAC		
Street Address 1042 Kenwick Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43209	M 0 3	D 0 2	Y 1 0	Amount 80.00

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools						
Full Name of Contributor Justin Hammond				Registration Number, if PAC		
Street Address 289 Lillian Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Pickerington	State O H	Zip Code 43147	M 0	D 3	Y 0 2 1 0	Amount 40.00
Full Name of Contributor Dean Townsend				Registration Number, if PAC		
Street Address 11350 Coop Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Thornville	State O H	Zip Code 43076	M 0	D 3	Y 0 2 1 0	Amount 75.00
Full Name of Contributor Paul Miller				Registration Number, if PAC		
Street Address 7796 Holderman Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Lewis Center	State O H	Zip Code 43035	M 0	D 3	Y 0 2 1 0	Amount 75.00
Full Name of Contributor Brenda Donelson				Registration Number, if PAC		
Street Address 787 Headley Pl		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0	D 3	Y 0 2 1 0	Amount 80.00
Full Name of Contributor Dianna Downing				Registration Number, if PAC		
Street Address 295 Stewart Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43206	M 0	D 3	Y 0 2 1 0	Amount 80.00
Full Name of Contributor Jenny Savakinas				Registration Number, if PAC		
Street Address 6723 New Alban Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City New Albany	State O H	Zip Code 43054	M 0	D 3	Y 0 2 1 0	Amount 90.00
Full Name of Contributor Lyle Linerode				Registration Number, if PAC		
Street Address 252 Ovevrdrive SE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Heath	State O H	Zip Code 43056	M 0	D 3	Y 0 2 1 0	Amount 70.00
Full Name of Contributor Laura Thomas				Registration Number, if PAC		
Street Address 10156 Wellington Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Pickerington	State O H	Zip Code 43147	M 0	D 3	Y 0 2 1 0	Amount 50.00

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools						
Full Name of Contributor C Richardson				Registration Number, if PAC		
Street Address 266 Blue Jay Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43235	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Kathryn Anderson				Registration Number, if PAC		
Street Address 3259 Vinton Park Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Hilliard	State O H	Zip Code 43026	M 0 3	D 0 2	Y 1 0	Amount 60.00
Full Name of Contributor Jerry Mackey				Registration Number, if PAC		
Street Address 2224 Berry Hill Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City Grove City	State O H	Zip Code 43123	M 0 3	D 0 2	Y 1 0	Amount 40.00
Full Name of Contributor Pamela Cook				Registration Number, if PAC		
Street Address 131 Bellebrooke Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Pataskala	State O H	Zip Code 43062	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Amy Carter				Registration Number, if PAC		
Street Address 151 Rivers Edge Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 30.00
Full Name of Contributor Thomas Gregory				Registration Number, if PAC		
Street Address 3547 Babbitt Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43004	M 0 3	D 0 2	Y 1 0	Amount 80.00
Full Name of Contributor Donna Bush				Registration Number, if PAC		
Street Address 4512 Neiswander Square		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City New Albany	State O H	Zip Code 43054	M 0 3	D 0 2	Y 1 0	Amount 100.00
Full Name of Contributor Michael Kralovic				Registration Number, if PAC		
Street Address 1984 Elbert Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Powell	State O H	Zip Code 43065	M 0 3	D 0 2	Y 1 0	Amount 50.00

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for Quality Schools						
Full Name of Contributor Kelly Shellhammer				Registration Number, if PAC		
Street Address 143 Brookhill Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 200.00
Full Name of Contributor Phyllis Solove				Registration Number, if PAC		
Street Address 8249 Deering Oaks Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Blacklick	State O H	Zip Code 43004	M 0 3	D 0 2	Y 1 0	Amount 70.00
Full Name of Contributor Kristen Juth				Registration Number, if PAC		
Street Address 108 Terrier Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Pataskala	State O H	Zip Code 43062	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Donna Sharkey				Registration Number, if PAC		
Street Address 1027 Hurley Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 25.00
Full Name of Contributor Anne Jackson				Registration Number, if PAC		
Street Address 215 Ainsworth		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Gregory Meadows				Registration Number, if PAC		
Street Address 7323 Fallow Trail		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Reynoldsburg	State O H	Zip Code 43068	M 0 3	D 0 2	Y 1 0	Amount 50.00
Full Name of Contributor Mark Meuser				Registration Number, if PAC		
Street Address 804 Cherry Bottom Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 90.00
Full Name of Contributor Tia Holliman				Registration Number, if PAC		
Street Address 362 Towne Court West		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State O H	Zip Code 43230	M 0 3	D 0 2	Y 1 0	Amount 40.00

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