

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

|                                                                  |                       |                                         |                   |                   |                                          |                         |  |
|------------------------------------------------------------------|-----------------------|-----------------------------------------|-------------------|-------------------|------------------------------------------|-------------------------|--|
| Name of Committee in Full<br><b>Citizens for Quality Schools</b> |                       |                                         |                   |                   |                                          |                         |  |
| Full Name of Contributor<br><b>Kathleen Mullooly-Erhard</b>      |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>648 Howell Dr</b>                           |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>check</b> |                         |  |
| City<br><b>Newark</b>                                            | State<br><b>O   H</b> | Zip Code<br><b>43055</b>                | M<br><b>0   9</b> | D<br><b>1   7</b> | Y<br><b>1   0</b>                        | Amount<br><b>100.00</b> |  |
| Full Name of Contributor<br><b>Sarah McLaughlin</b>              |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>5310 John Bowling Drive</b>                 |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>cash</b>  |                         |  |
| City<br><b>Canal Winchester</b>                                  | State<br><b>O   H</b> | Zip Code<br><b>43110</b>                | M<br><b>0   9</b> | D<br><b>1   7</b> | Y<br><b>1   0</b>                        | Amount<br><b>50.00</b>  |  |
| Full Name of Contributor<br><b>Julie Kearney</b>                 |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>2453 Nottingham Road</b>                    |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>cash</b>  |                         |  |
| City<br><b>Upper Arlington</b>                                   | State<br><b>O   H</b> | Zip Code<br><b>43221</b>                | M<br><b>0   9</b> | D<br><b>1   7</b> | Y<br><b>1   0</b>                        | Amount<br><b>50.00</b>  |  |
| Full Name of Contributor<br><b>Brenda Nelson</b>                 |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>12138 Mill Street Road</b>                  |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>cash</b>  |                         |  |
| City<br><b>Pataskala</b>                                         | State<br><b>O   H</b> | Zip Code<br><b>43062</b>                | M<br><b>0   9</b> | D<br><b>1   7</b> | Y<br><b>1   0</b>                        | Amount<br><b>20.00</b>  |  |
| Full Name of Contributor<br><b>Bobbie Browning</b>               |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>6314 Galston Ct</b>                         |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>cash</b>  |                         |  |
| City<br><b>Canal Winchester</b>                                  | State<br><b>O   H</b> | Zip Code<br><b>43110</b>                | M<br><b>0   9</b> | D<br><b>1   7</b> | Y<br><b>1   0</b>                        | Amount<br><b>25.00</b>  |  |
| Full Name of Contributor<br><b>Patty McQuirt</b>                 |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>605 Codrington Circle</b>                   |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>cash</b>  |                         |  |
| City<br><b>Gahanna</b>                                           | State<br><b>O   H</b> | Zip Code<br><b>43230</b>                | M<br><b>0   9</b> | D<br><b>1   7</b> | Y<br><b>1   0</b>                        | Amount<br><b>20.00</b>  |  |
| Full Name of Contributor<br><b>Linda Simpson</b>                 |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>330 Heil Drive</b>                          |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>cash</b>  |                         |  |
| City<br><b>Gahanna</b>                                           | State<br><b>O   H</b> | Zip Code<br><b>43230</b>                | M<br><b>0   9</b> | D<br><b>1   7</b> | Y<br><b>1   0</b>                        | Amount<br><b>100.00</b> |  |
| Full Name of Contributor<br><b>Heather Palmer</b>                |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>7094 Stapleton Drive</b>                    |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>cash</b>  |                         |  |
| City<br><b>New Albany</b>                                        | State<br><b>O   H</b> | Zip Code<br><b>43054</b>                | M<br><b>0   9</b> | D<br><b>1   7</b> | Y<br><b>1   0</b>                        | Amount<br><b>5.00</b>   |  |

\* 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)]

Page Total \$ 370.00