31-A
R.C. 3517.10

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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						**Registration Number, if PAC**	
Joe Daugherty							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
940 Tellega							cash
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43207	09	29	10		20.00
Full Name of Contributor						**Registration Number, if PAC**	
Deanna Pentello-Less							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
219 Camrose Ct							cash
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Gahanna	OH	43230	09	29	10		20.00
Full Name of Contributor						**Registration Number, if PAC**	
Sarah Bratt							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
3137 Grey Fox Drive							check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Gahanna	OH	43230	09	29	10		40.00
Full Name of Contributor						**Registration Number, if PAC**	
TK Margolis							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
1047 Grandon Avenue							check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Bexley	OH	43209	09	29	10		25.00
Full Name of Contributor						**Registration Number, if PAC**	
Ellen Maxwell							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
1266 Ashburnham Dr							check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Gahanna	OH	43230	09	29	10		100.00
Full Name of Contributor						**Registration Number, if PAC**	
Terri Koozer							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
1110 Lori Lane							check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Westerville	OH	43081	09	29	10		100.00
Full Name of Contributor						**Registration Number, if PAC**	
Dawn Fickel							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
2701 Northmont Dr							check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Blacklick	OH	43004	09	29	10		75.00
Full Name of Contributor						**Registration Number, if PAC**	
Lane Wood							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
762 Tim Tam Ave							check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Gahanna	OH	43230	09	29	10		25.00

* 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)]

Page Total $ 405.00