

STRAIGHT **A** FUND

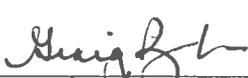
Consortium Member (if applicable)

Name: Dr. Robert Hill
 Title: Superintendent
 IRN: 048157
 Phone: 440.965.5821
 Email: r.hill@firelandschools.org
 Address: 112 North Lake Street
 City: South Amherst
 State: Ohio
 Zip: 44001

Sign: 
 Date: 10/23/13

Consortium Member (if applicable)

Name: Mr. Graig Bansek
 Title: Superintendent
 IRN: 048140
 Phone: 440-236-5008
 Email: bansekg@columbia.k12.oh.us
 Address: 25796 Royalton Rd., #4
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 State: Ohio
 Zip: 44028

Sign: 
 Date: 10/24/13

Consortium Member (if applicable)

Name: Dave Keith
 Title: Curriculum
 IRN: _____
 Phone: _____
 Email: _____
 Address: _____
 City: _____
 State: _____
 Zip: _____

Sign: _____
 Date: _____

Consortium Member (if applicable)

Name: _____
 Title: _____
 IRN: _____
 Phone: _____
 Email: _____
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