

Statement of Contributions Received

Prescribed by Secretary of State 8/95

Name of Committee in Full New Albany For Kids									
Full Name of Contributor Patrick Finn									
Street Address 5583 Mercer Ridge				Employer/Occupation/Labor Organization*				Registration Number, if PAC	
City Columbus		State O		Zip Code 43228		M 0		D 9	
		H				Y 1		2	
						8		0	
								8	
				Form (Cash, Check, etc.) check				Amount \$15.00	
Full Name of Contributor Karen Morlan									
Street Address 7217 Tumblebrook Dr				Employer/Occupation/Labor Organization*				Registration Number, if PAC	
City New Albany		State O		Zip Code 43054		M 0		D 9	
		H				Y 1		2	
						8		0	
								8	
				Form (Cash, Check, etc.) check				Amount \$15.00	
Full Name of Contributor Mary Darling									
Street Address 6980 New Albany Rd East				Employer/Occupation/Labor Organization*				Registration Number, if PAC	
City New Albany		State O		Zip Code 43054		M 0		D 9	
		H				Y 1		2	
						8		0	
								8	
				Form (Cash, Check, etc.) check				Amount \$15.00	
Full Name of Contributor Melissa Schill									
Street Address 3839 Pine Meadow Road				Employer/Occupation/Labor Organization*				Registration Number, if PAC	
City New Albany		State O		Zip Code 439054		M 0		D 9	
		H				Y 1		2	
						8		0	
								8	
				Form (Cash, Check, etc.) check				Amount \$15.00	
Full Name of Contributor Linda Rossoll									
Street Address 4082 Silver Springs Lane				Employer/Occupation/Labor Organization*				Registration Number, if PAC	
City Columbus		State O		Zip Code 43230		M 0		D 9	
		H				Y 1		0	
						8		0	
								8	
				Form (Cash, Check, etc.) check				Amount \$30.00	
Full Name of Contributor Karrie Horton									
Street Address 39 Logan Ave				Employer/Occupation/Labor Organization*				Registration Number, if PAC	
City Westerville		State O		Zip Code 43081		M 0		D 9	
		H				Y 0		1	
						8		0	
								8	
				Form (Cash, Check, etc.) check				Amount \$30.00	
Full Name of Contributor Robyn Davison									
Street Address 1383 Smoketown Rd				Employer/Occupation/Labor Organization*				Registration Number, if PAC	
City Utica		State O		Zip Code 43080		M 0		D 9	
		H				Y 1		1	
						8		0	
								8	
				Form (Cash, Check, etc.) check				Amount 5.00	

*Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation rather than employer should be listed. If two or more employees donate 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 \$ 125.00