

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Our Community Our Schools							
Full Name of Contributor Patricia Pierpoint					Registration Number, if PAC		
Street Address 155 Sea Shell Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State o h	Zip Code 43082	M 0 9	D 2 9	Y 1 1	Amount 50.00	
Full Name of Contributor Stacey Roeber					Registration Number, if PAC		
Street Address 5709 Springside Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State o h	Zip Code 43230	M 0 9	D 2 8	Y 1 1	Amount 20.00	
Full Name of Contributor Robin Trueman					Registration Number, if PAC		
Street Address 411 Montreal Pl		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State o h	Zip Code 43081	M 0 9	D 2 6	Y 1 1	Amount 40.00	
Full Name of Contributor Barbara Sutton					Registration Number, if PAC		
Street Address 3209 Minerva Lake Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State o h	Zip Code 43231	M 1 0	D 0 4	Y 1 1	Amount 85.00	
Full Name of Contributor Kelley Gilbert					Registration Number, if PAC		
Street Address 5556 Sierra Ridge Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State o h	Zip Code 43231	M 1 0	D 0 4	Y 1 1	Amount 45.00	
Full Name of Contributor Kelley Gilbert					Registration Number, if PAC		
Street Address 5556 Sierra Ridge Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State o h	Zip Code 43231	M 1 0	D 0 4	Y 1 1	Amount 45.00	
Full Name of Contributor Janice Hill					Registration Number, if PAC		
Street Address 584 Spring Brk E		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State o h	Zip Code 43081	M 1 0	D 0 3	Y 1 1	Amount 84.00	
Full Name of Contributor Amy Eyerman					Registration Number, if PAC		
Street Address 7188 Hawksbeard Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State o h	Zip Code 43082	M 1 0	D 0 4	Y 1 1	Amount 63.00	

* 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 \$ 432.00