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* 450	.4. U

## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full									
Our Community Our Schools		in a reason of the second		o o o o o o o o o o o o o o o o o o o		anni anni anni anni anni anni anni anni			
Full Name of Contributor				Registra	tion Num	ber, if PA	AC		
Tawnya Barton	THE OWNER OF THE OWNER	*****************			500,5000,000,000				
Street Address	Employe	r/Occup	ation/Labor Organization*				Form (Cash, Che	ck, etc.)	
6327 Champions Drive							Check		
City	St	ate	Zip Code	M	D	I . I	Amount		
Westerville		H	43082	0 9	2 4	0 9		40.00	
Full Name of Contributor				Registra	tion Num	iber, if PA	AC		
Kathy Farish									
Street Address	Employe	r/Occup	ation/Labor Organization*				Form (Cash, Che	ck, etc.)	
4470 Central College							Check		
City	St	ate	Zip Code	M	D	Y	Amount		
Westerville	0	Н	43082	0 9	2 4	0 9		100.00	
Full Name of Contributor		Secretary and productions		Registra	tion Nun	ber, if PA	AC		
Valerie Jackowski									
Street Address	Employe	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
7820 Talon Circle							Check		
City	St	ate	Zip Code	M	D	Y	Amount		
Westerville		Н	43082	0 9	2 4	0 9		37.00	
Full Name of Contributor				PROCESSOR AND ADDRESS OF THE PROPERTY OF THE P		ber, if PA	AC		
Deidre Dews Justice									
Street Address	Employe	r/Occup	ation/Labor Organization*	- Barrier	(Anjeropole erribios) mai (Ange		Form (Cash, Che	ck, etc.)	
32 W Plum St							Check		
City	St	ate	Zip Code	M	D	Y	Amount	***********	
Westerville		Н	43081	0 9	2 4	0   9		80.00	
Full Name of Contributor			20001	and production of the commence of	CONTROL CONTROL CONTROL CONTROL	ber, if P	AC		
Angela Sheriff									
Street Address	Employe	r/Occup	ation/Labor Organization*	_B			Form (Cash, Che	ck, etc.)	
7115 Shady Nelms Drive		•					Check		
City	St	ate	Zip Code	M	D	Y	Amount		
Dublin		Н	43017	0 9	2 4	0 9		15.00	
Full Name of Contributor			1001/	GEOGRAFIUS STREET, STR	edicaction to the control of the con	ber, if P	AC	10.00	
Constance Brown									
Street Address	Employe	r/Occup	ation/Labor Organization*				Form (Cash, Che	ck, etc.)	
7170 Charleton Ct		•	•				Check		
City	St	ate	Zip Code	M	D	Y	Amount		
Canal Winchester		Н	43110	1019	2 4	0   9		50.00	
Full Name of Contributor			10.110			ber, if PA		00.00	
Valerie El-Hodiri									
Street Address	Employe	r/Occup	ation/Labor Organization*	_			Form (Cash, Che	ck, etc.)	
2639 Bressler Court							Check	, ,	
City	St	ate	Zip Code	M	D	Y	Amount		
Hilliard	0	h	43026	0 9	2 5	1 . 1		30.00	
Full Name of Contributor	1 0		1 20020	ORIGINAL SANCTONIA SANCTON		ber, if Pa	AC	00.00	
Diane Brewer				2		. ,			
Street Address	Employe	r/Occup	ation/Labor Organization*				Form (Cash, Che	eck, etc.)	
1192 Wallean Way		p					Check		
City	St.	ate	Zip Code	M	D	Y	Amount	<del>(1/4/20)/01/20  </del>	
Westerville		Н	43081	1	2 5			80.00	
vvester ville		 	] TOUL	コローフ		」ひ!フ		00.00	

\* 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