

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Our Community Our Schools							
Full Name of Contributor Tawnya Barton					Registration Number, if PAC		
Street Address 6327 Champions Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0	D 9	Y 2	Amount 40.00	
Full Name of Contributor Kathy Farish					Registration Number, if PAC		
Street Address 4470 Central College		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0	D 9	Y 2	Amount 100.00	
Full Name of Contributor Valerie Jackowski					Registration Number, if PAC		
Street Address 7820 Talon Circle		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0	D 9	Y 2	Amount 37.00	
Full Name of Contributor Deidre Dews Justice					Registration Number, if PAC		
Street Address 32 W Plum St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 0	D 9	Y 2	Amount 80.00	
Full Name of Contributor Angela Sheriff					Registration Number, if PAC		
Street Address 7115 Shady Nelms Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 0	D 9	Y 2	Amount 15.00	
Full Name of Contributor Constance Brown					Registration Number, if PAC		
Street Address 7170 Charleton Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Canal Winchester	State O H	Zip Code 43110	M 0	D 9	Y 2	Amount 50.00	
Full Name of Contributor Valerie El-Hodiri					Registration Number, if PAC		
Street Address 2639 Bressler Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State o h	Zip Code 43026	M 0	D 9	Y 2	Amount 30.00	
Full Name of Contributor Diane Brewer					Registration Number, if PAC		
Street Address 1192 Wallean Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 0	D 9	Y 2	Amount 80.00	

* 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