

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Cindy Crowe For School Board							
Full Name of Contributor Christine M. Thorp					Registration Number, if PAC		
Street Address 6121 Teasel Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0 6	D 0 1	Y 0 7	Amount 250.00	
Full Name of Contributor D. M. Racik					Registration Number, if PAC		
Street Address 5849 Torrey Pines Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0 6	D 0 1	Y 0 7	Amount 150.00	
Full Name of Contributor Mary Joy Rose					Registration Number, if PAC		
Street Address 2945 Berry Lane Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43231	M 0 6	D 0 1	Y 0 7	Amount 100.00	
Full Name of Contributor Donna M. Kosanovich					Registration Number, if PAC		
Street Address 1147 Hooverview Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0 7	D 0 3	Y 0 7	Amount 20.00	
Full Name of Contributor Randolph Johanneck					Registration Number, if PAC		
Street Address 1125 Sea Shell Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0 7	D 0 3	Y 0 7	Amount 100.00	
Full Name of Contributor Linda Bokros					Registration Number, if PAC		
Street Address 642 Berkeley Pl. N.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 0 7	D 0 3	Y 0 7	Amount 25.00	
Full Name of Contributor Richard C. Bannister					Registration Number, if PAC		
Street Address 124 Hampton Park E.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 0 7	D 0 3	Y 0 7	Amount 50.00	
Full Name of Contributor Kevin W. Hoffman					Registration Number, if PAC		
Street Address 1147 Tidewater Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0 7	D 0 5	Y 0 7	Amount 100.00	

* 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 \$ 795.00