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R.C.	3517	10	

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full		· <u></u>				
Plain Local Education As	sociati	on Political.	Action Co	mmittee		
Tirza Cameron			Registration Number, if Pa	AC .		
Street Address 4599 Herb Garden Dr	Employer/Occupati	on/Labor Organization		Form (Cash, Check, etc.)		
City	State OH	2ip Code 43054	M D Y Y 5	Amount \$60		
Full Name of Contributor	01:	1 9000	Registration Number, if P.			
Kirsten Jaster Streel Address	Employer/Occupati	on/Labor Organization		Form (Cash, Check, etc.)		
4864 Whisper Cove Ct.	State	Zip Code	M D Y	Cash		
Gahanna	ОН	43230	102715	4100_		
Full Name of Contributor Registration Number, if PAC Registration Number, if PAC						
Street Address Redwood Dr.	Employer/Occupati	on/Labor Organization*		Form (Cash, Check, etc.)		
Johnstown	State OH	Zip Code 43031	M D Y Y 5	Amount 55 -		
Full Name of Contributor Shannon May	'		Registration Number, if P.			
Street Address	Employer/Occupati	on/Labor Organization		Form (Cash, Check, etc.)		
1309 Irail East	State	Zip Code	M D Y	Amount		
Name of Contributor	ОН	43062	Registration Number, if P.	4C		
Tim Bush Street Address	Employer/Occupati	ion/Labor Organization		Form (Cash, Check, etc.)		
5430 Haussman Pl			1 12 1 15 1 15 1 15 1 15 1 15 1 15 1 15	Cash		
New Albany	State OH	13054	102915	\$30-		
Full Name of Contributor			Registration Number, if P.	AC I		
Street Address	Employer/Occupat	ion/Labor Organization		Form (Cash, Check, etc.)		
City	State OH	Zip Code	M D Y	Amount		
Full Name of Contributor	<u> </u>	<u></u>	Registration Number, if P	AC		
Street Address	Employer/Occupat	ion/Labor Organization*	· · · · · · · · · · · · · · · · · · ·	Form (Cash, Check, etc.)		
City	State	Zip Code	M D Y	Amount		
Full Name of Contributor	OH		Registration Number, if F	AC .		
Street Address Employer/Occupation/Labor Organization						
			1 4 1 2 7 3	Form (Cash, Check, etc.)		
City	State OH	Zip Code	M D Y	Amount		

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 also appear. [R.C. 3517.10(B)(4)]

Page Total \$ 275