31-A
R.C. 3517.10

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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							Registration Number, if PAC	
Vicki Moss								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
487 Olde English Ct.							Check	
City	State	Zip Code	M	D	Y		Amount	
Westerville	OH	43082	07	24	07			40.00
Full Name of Contributor							Registration Number, if PAC	
Martha J. Peet								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
6157 Peppergrass Ct.							Check	
City	State	Zip Code	M	D	Y		Amount	
Westerville	OH	43082	07	25	07			30.00
Full Name of Contributor							Registration Number, if PAC	
Karen Larkin								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
7820 Prairie Fire Ct.							Check	
City	State	Zip Code	M	D	Y		Amount	
Westerville	OH	43082	07	27	07			50.00
Full Name of Contributor							Registration Number, if PAC	
Claire E. Sampson								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
438 Rockbourne Dr.							Check	
City	State	Zip Code	M	D	Y		Amount	
Westerville	OH	43082	07	31	07			50.00
Full Name of Contributor							Registration Number, if PAC	
Nancy E. Barnett								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
4962 Deer Forest Place							Check	
City	State	Zip Code	M	D	Y		Amount	
Westerville	OH	43081	07	31	07			50.00
Full Name of Contributor							Registration Number, if PAC	
Bill Tompos								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
389 Scottsdale Ct.							Check	
City	State	Zip Code	M	D	Y		Amount	
Westerville	OH	43082	07	31	07			25.00
Full Name of Contributor							Registration Number, if PAC	
Debra P. Ubry								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
7293 Hawksbeard Dr.							Check	
City	State	Zip Code	M	D	Y		Amount	
Westerville	OH	43082	08	02	07			50.00
Full Name of Contributor							Registration Number, if PAC	
Nancy Shew								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
956 Woodsedge Lane							Check	
City	State	Zip Code	M	D	Y		Amount	
Westerville	OH	43081	08	06	07			50.00

* 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 $ 345.00