Daga	27
Page	4

Statement of Contributions Received

Prescribed by Secretary of State 3/05

							etti ja
Name of Committee in Full							
Our Community Our Schools							
Full Name of Contributor			Registra	tion Nun	ber, if Pa	AC	
Cody Ball							
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Che	ck, etc.)
890 Helenhurst Ct						Check	
City	State	Zip Code	M	D	Y	Amount	
Westerville	O H	43081	1 0	2 5	0 9		20.00
Full Name of Contributor			Registra	tion Nun	ber, if Pa	AC	
Sarah Gormley							
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Che	ck, etc.)
5166 Saint Peter St						Check	
City	State	Zip Code	M	D	Y	Amount	***************************************
Columbus	OH	43221	1 0	2 5	0 9		10.00
Full Name of Contributor			Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner,	NOVERSON AND EDUCATION OF THE PARTY OF	ber, if Pa	AC	
Brenda Jackson							
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Che	ck, etc.)
1028 Egret Ct						Check	
City	State	Zip Code	M	D	Y	Amount	
Westerville	ОН	43082	110	2 5	0 9		50.00
Full Name of Contributor		1000	inamen (liberali en contabilizació con	Contraction and discount with	ber, if Pa	AC	
Sherry Birchem							
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Che	ck, etc.)
194 W Home St		· ·				Check	
City	State	Zip Code	М	D	Y	Amount	Mint to the total control of t
Westerville	$O \mid H$	43081	1 0	1 .			50.00
Full Name of Contributor		1 -2000 2	ceasure province anima consulta	NEWSON WITH SOMEONE	ber, if Pa	A.C	00.00
Tamra Saltzmann					,		
Street Address	Employer/Occup	ation/Labor Organization*		anni anno anno 600 ann		Form (Cash, Che	ck. etc.)
7054 Jean Court						Check	, ,
City	State	Zip Code	M	D	Y	Amount	
Westerville	$O \mid H$	43082	$ _{1 0}$	1 .	1		25.00
Full Name of Contributor		***************************************	erenderen erenteren er	A PROPERTY OF THE PERSONS AND ADDRESS AND	ber, if P	AC	2.00
Iane Webster					,		
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Che	ck. etc.)
325 Fayburrow Dr	Zampiojen seeup					Check	,,
City	State	Zip Code	Ιм	D	ΙΥ	Amount	
Sunbury	OH	43074			0 9		50.00
Full Name of Contributor		1 100/1	Registra	tion Num	ber, if Pa	A.C.	00.00
Teresa Hill			,g		,		
Street Address	Fmnlover/Occur	ation/Labor Organization*			and the second second	Form (Cash, Che	ck_etc.)
	Employer/Occupation/Labor Organization*			Check	CIC, CIC.)		
5278 Haverhill Drive	State	Zip Code	М	D	ΙΥ	Amount	
	1	1	I .	1 .	1 .	Amount	25.00
Dublin		<u> 43017</u>	1 0		0 9 ber, if P	L AC	25.00
Full Name of Contributor			registra	mon Null	ioci, ii Pi		
Erin Donovan	IE/0	vation/Labor Organization*			STORMAN CONTRACTOR	Form (Cash, Che	ock atc.)
Street Address	Employer/Occup	ation/Lagor Organization*				1	ck, cic.j
816 Park Road		IZ'. C. J.		T 5	1 37	Check	ESTERNATURA DE SERVICIO DE
City	State	Zip Code	M	D	Y	Amount	20.00
Westerville	O H	43082	1 0	2 5	0 9		20.00

* 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)]

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Page	Total	\$	250.00