Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Teater for Schools				
Full Name of Contributor Norman McElheny			Registration Number, it	FPAC .
Street Address 3825 Dayspring Dr.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check
City Hilliard	State OH	Zip Code 43026	1 0 0 4 1	Amount 3 \$50.00
Full Name of Contributor Stanton West	-		Registration Number, i	FPAC
Street Address 4739 Shire Ridge Rd. W.	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Hilliard	State OH	Zip Code 43026	1 0 0 2 1	Amount 3 \$100.00
Full Name of Contributor Michael Gillotti Registration Number, if PAC				
Street Address 3864 Dayspring Dr.	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Check
City Hilliard	State OH	Zip Code 43026	$\begin{bmatrix} 1 \\ 0 \end{bmatrix} \begin{bmatrix} 0 \\ 7 \end{bmatrix} \begin{bmatrix} 1 \\ 1 \end{bmatrix}$	
Full Name of Contributor Larry Earman Registration Number, if PAC				
Street Address 4369 Shire Creek Ct.	Employer/Occi	pation/Labor Organization		Form (Cash, Check, etc.) Check
City Hilliard	State OH	Zip Code 43026		3 \$100.00
Full Name of Contributor Dorothy Teater Registration Number, if PAC				
Street Address 3272 Cleeve HI.	Employer/Occu	upation/Labor Organization		Form (Cash, Check, etc.) Check
City Dublin	State OH	Zip Code 43017		3 \$1,000.00
Full Name of Contributor Gary Orr Registration Number, if PAC				
Street Address 3528 River Landings Blvd.	Employer/Occ	upation/Labor Organization		Form (Cash, Check, etc.) Check
City Hilliard	State OH	Zip Code 43026	1 1 1 1.	3 \$25.00
Full Name of Contributor Phyllis Reynolds			Registration Number,	
Street Address 3870 Stonesthrow Ct. W.	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check
City Hilliard	State OH	Zip Code 43026		3 \$25.00
Full Name of Contributor Clarence Cunningham Registration Number, if PAC				
Street Address 3480 Scioto Run Blvd.		supation/Labor Organization		Form (Cash, Check, etc.) Check
City Hilliard	State OH	Zip Code 43026	1 0 0 8 1	Amount 3 \$50.00

Page Total \$1,450.00

^{*} 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 also appear. [R.C. 3517.10(B)(4)]