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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full	ilanigatungan melilan-lahan			OT FAMILY OF THE STATE OF THE S					
Full Name of Contributor	Our Community Our Schools				Registration Number, if PAC				
Jan Thomas						,			
Street Address	Employe	/Occupa	ation/Labor Organization*		photokobia kilositemeidik		Form (Cash, Chec	k, etc.)	
1154 Autumn Creek Circle							Check		
City	Sta	te	Zip Code	M	D	Y	Amount		
Westerville	0	Н	43081	0 9	2   5	0 9		20.00	
Full Name of Contributor Registration Number, if PAC									
Claudia Yoho									
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
6887 Meadow Glen							Check		
City	Sta	te	Zip Code	M	D	Y	Amount		
Westerville	0	Н	43082	0 9	2 5	0 9		65.00	
Full Name of Contributor	and the second s			Registr	CANADA MARKACANA SANCANA ANTA	ber, if P.	AC		
Lindsey Barron									
Street Address	Employe	r/Occupa	ation/Labor Organization*				Form (Cash, Chec	ck, etc.)	
6911 Meadow Oak Drive							Check		
City	Sta	te	Zip Code	M	D	Y	Amount		
Columbus	0	H	43235	0 9	2 5	0 9		15.00	
Full Name of Contributor				Registr	ation Nun	nber, if P.	AC		
Janice Hill									
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)		
1038 Farrington Dr						n garanton con con con con con con con con con c	Check		
City	Sta		Zip Code	M	D	Y	Amount		
Westerville		H	43081	0 9	COLOR DE LA COLOR	CONTRACTOR OF THE PARTY OF THE	A CANADA SANDARA SANDA	80.00	
Full Name of Contributor Registration Number, if PAC									
Karen Garrison		-							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)		
219 Oakwood Ct			Tax Cont	7	T 5	1 37	Check	<del></del>	
City	Sta		Zip Code	M	D	Y	Amount	E0.00	
Westerville		Н	43081	0 9	COURT OF THE PROPERTY OF THE PERSON OF THE P			50.00	
Full Name of Contributor				Registr	ation Nui	nber, if P	AC		
Jane Henson	15		atian / aban Ouconization &	<u> </u>			Form (Cash, Che	olc etc.)	
Street Address	Employer/Occupation/Labor Organization*				Check	JK, Cic.)			
5404 Grand Ridge Drive	Sta	***	Zip Code	l M	D	ΙΥ	Amount	**************************************	
City		Н	43021		1	0 9	8	20.00	
Galena Full Name of Contributor		* *	1 43021			nber, if P		<i>2</i> U.UU	
				i cognou					
Greg Mantenieks Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
1229 Smily Court	Zanpio, otto congramo in a secondario de la constanti de la co				Check				
City	Sta	ite	Zip Code	М	D	Y	Amount		
Westerville	0	h	43081	0 9	I .	i .	E .	70.00	
Full Name of Contributor			10001			nber, if P			
Alison Miller									
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)					
4432 Cohagen Crossing Dr				Check					
City	Sta	ate	Zip Code	M	D	Y	Amount		
New Albany		Н	43054	0 9	2   5	0 9		30.00	
coving for contributions from individuals over \$100 to statewide and		mbly car		M/Diversion minutes	THE RESERVE AND THE PERSONS AN	<u>galanteen maanahuun maana</u>			

\* 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 \$ 350.00