

# FOR PAPER FILING ONLY

## Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Return Nancy Nestor-Baker to School Board</b>							
Full Name of Contributor <b>Jerry McAfee</b>				Registration Number, if PAC			
Street Address <b>2145 Keltonshire Avenue</b>		Employer/Occupation/Labor Organization <b>Retired</b>		Form (Cash, Check, etc.) <b>Check</b>			
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43229</b>	M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>\$200.00</b>	
Full Name of Contributor <b>Nancy Cowee</b>				Registration Number, if PAC			
Street Address <b>1128 Forest Glen Place</b>		Employer/Occupation/Labor Organization <b>Community Volunteer</b>		Form (Cash, Check, etc.) <b>Check</b>			
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43081</b>	M <b>1</b>	D <b>0</b>	Y <b>3</b>	Amount <b>\$100.00</b>	
Full Name of Contributor <b>Robert Woodruff</b>				Registration Number, if PAC			
Street Address <b>671 Kienle Avenue</b>		Employer/Occupation/Labor Organization <b>Retired</b>		Form (Cash, Check, etc.) <b>Check</b>			
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43081</b>	M <b>1</b>	D <b>0</b>	Y <b>3</b>	Amount <b>\$25.00</b>	
Full Name of Contributor <b>Marlene Deringer</b>				Registration Number, if PAC			
Street Address <b>5338 Meadowood Lane</b>		Employer/Occupation/Labor Organization <b>Retired</b>		Form (Cash, Check, etc.) <b>Check</b>			
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43082</b>	M <b>1</b>	D <b>0</b>	Y <b>3</b>	Amount <b>\$25.00</b>	
Full Name of Contributor <b>John Thesing</b>				Registration Number, if PAC			
Street Address <b>214 E. Tompkins Street</b>		Employer/Occupation/Labor Organization <b>Teacher</b>		Form (Cash, Check, etc.) <b>Check</b>			
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43202</b>	M <b>1</b>	D <b>0</b>	Y <b>3</b>	Amount <b>\$5.00</b>	
Full Name of Contributor <b>Westerville Education Association</b>				Registration Number, if PAC			
Street Address <b>519 S. Otterbein Avenue</b>		Employer/Occupation/Labor Organization <b>Labor Organization</b>		Form (Cash, Check, etc.) <b>Check</b>			
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43081</b>	M <b>1</b>	D <b>0</b>	Y <b>3</b>	Amount <b>\$3,000.00</b>	
Full Name of Contributor <b>Cindy Crowe</b>				Registration Number, if PAC			
Street Address <b>8545 Button Bush Lane</b>		Employer/Occupation/Labor Organization <b>Teacher</b>		Form (Cash, Check, etc.) <b>Pay Pal</b>			
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43082</b>	M <b>1</b>	D <b>0</b>	Y <b>3</b>	Amount <b>\$100.00</b>	
Full Name of Contributor				Registration Number, if PAC			
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
City	State <b>OH</b>	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)]