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							
Our Community Our Schools							
Full Name of Contributor						Registration Number, if PAC	
Elizabeth A. Dalin							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
? Rd.						Check	
City	State	Zip Code	M	D	Y	Amount	
?	O | H	43214	0 9	2 6	1 1	60.00	
Full Name of Contributor						Registration Number, if PAC	
Tonya S. Salisbury							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
330 Leighton Court						Check	
City	State	Zip Code	M	D	Y	Amount	
Westerville,	O | H	43082	0 9	2 7	1 1	5.00	
Full Name of Contributor						Registration Number, if PAC	
Roger W. Howard							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
136 Cherokee Dr.						Check	
City	State	Zip Code	M	D	Y	Amount	
Westerville,	O | H	43081	0 9	1 5	1 1	100.00	
Full Name of Contributor						Registration Number, if PAC	
Mary Taylor							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
29 Highmeadows Circle						Check	
City	State	Zip Code	M	D	Y	Amount	
Powell,	O | H	43065	0 9	2 7	1 1	25.00	
Full Name of Contributor						Registration Number, if PAC	
Lisa A. Dapoz							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
1107 Marie Lou Dr.						Check	
City	State	Zip Code	M	D	Y	Amount	
Westerville,	O | H	43081	0 9	2 7	1 1	50.00	
Full Name of Contributor						Registration Number, if PAC	
Kristin M. Quinn							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
8111 Stone Trace. Cir.						Check	
City	State	Zip Code	M	D	Y	Amount	
Westerville,	O | H	43081	0 9	2 5	1 1	40.00	
Full Name of Contributor						Registration Number, if PAC	
Michele L. Bertus							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
5709 Warner Park Dr.						Check	
City	State	Zip Code	M	D	Y	Amount	
Westerville,	O | H	43081	0 9	2 7	1 1	50.00	
Full Name of Contributor						Registration Number, if PAC	
Gandee & Associates, Inc.							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
6375-C Old Avery Road						Check	
City	State	Zip Code	M	D	Y	Amount	
Dublin,	O | H	43016	0 9	2 8	1 1	250.00	

* 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 $ 580.00