

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Reynoldsburg Educators PAC							
Full Name of Contributor Tammy Groezinger				Registration Number, if PAC 46-3439411			
Street Address 1114 Chaser St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Blacklick	State OH	Zip Code 43004	M 11	D 30	Y 15	Amount 30.00	
Full Name of Contributor Lorraine Gaughenbaugh				Registration Number, if PAC			
Street Address 12930 Edgewood Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Pickerington	State OH	Zip Code 43147	M 11	D 30	Y 15	Amount 15.00	
Full Name of Contributor Wendie Pfaff				Registration Number, if PAC			
Street Address 9509 Timberbank Cir		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Pickerington	State OH	Zip Code 43147	M 11	D 30	Y 15	Amount 15.00	
Full Name of Contributor Chris Menhorn				Registration Number, if PAC			
Street Address 1334 W. 3rd Ave. Apt. D		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43212	M 11	D 30	Y 15	Amount 45.00	
Full Name of Contributor Kathleen Brownley				Registration Number, if PAC			
Street Address 5703 Concord Hill Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus, &	State OH	Zip Code 43213	M 11	D 30	Y 15	Amount 30.00	
Full Name of Contributor James Olivola				Registration Number, if PAC			
Street Address 54 W. 8th Ave. Apt. 4		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43201	M 11	D 30	Y 15	Amount 20.00	
Full Name of Contributor Anne Trachsel				Registration Number, if PAC			
Street Address 7302 Timbercreek Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Reynoldsburg	State OH	Zip Code 43068	M 11	D 30	Y 15	Amount 30.00	
Full Name of Contributor Lisa Gomez				Registration Number, if PAC			
Street Address 7786 State Ridge Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Reynoldsburg	State OH	Zip Code 43068	M 11	D 30	Y 15	Amount 15.00	

* 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)]

\$200