

Statement of Contributions Received

Prescribed by Secretary of State 3/05

| | | | | | | | |
|---|-------------|--|--------|--------|------------------------------------|------------------|--|
| Name of Committee in Full Scott Mounts for GJ School Board | | | | | | | |
| Full Name of Contributor Scott Mounts | | | | | Registration Number, if PAC N/A | | |
| Street Address 195 Greenbank Rd. | | Employer/Occupation/Labor Organization* August Mack Environmental, Inc. | | | Form (Cash, Check, etc.) Check | | |
| City Gahanna | State OH | Zip Code 43230 | M 0 | D 9 | Y 2 | Amount 250.00 | |
| Full Name of Contributor Lee Roy Bentley | | | | | Registration Number, if PAC N/A | | |
| Street Address 410 Braemer Ct. | | Employer/Occupation/Labor Organization* Huntington National Bank | | | Form (Cash, Check, etc.) Check | | |
| City Gahanna | State OH | Zip Code 43230 | M 1 | D 0 | Y 0 | Amount 200.00 | |
| Full Name of Contributor Joseph Rios | | | | | Registration Number, if PAC N/A | | |
| Street Address 2133 N. Mockingbird Lane | | Employer/Occupation/Labor Organization* Retired | | | Form (Cash, Check, etc.) Check | | |
| City Abilene | State TX | Zip Code 79603 | M 1 | D 0 | Y 0 | Amount 25.00 | |
| Full Name of Contributor | | | | | Registration Number, if PAC | | |
| Street Address | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) | | |
| City | State | Zip Code | M | D | Y | Amount | |
| Full Name of Contributor | | | | | Registration Number, if PAC | | |
| Street Address | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) | | |
| City | State | Zip Code | M | D | Y | Amount | |
| Full Name of Contributor | | | | | Registration Number, if PAC | | |
| Street Address | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) | | |
| City | State | Zip Code | M | D | Y | Amount | |
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| City | State | Zip Code | M | D | Y | Amount | |
| Full Name of Contributor | | | | | Registration Number, if PAC | | |
| Street Address | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) | | |
| City | State | 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 475.00