

FOR PAPER FILING ONLY

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Return Nancy Nestor-Baker to School Board						
Full Name of Contributor Westerville Education Association				Registration Number, if PAC will be provided ASAP		
Street Address 519 Otterbein Avenue		Employer/Occupation/Labor Organization* Labor Organization		Form (Cash, Check, etc.) check		
City Westerville	State OH	Zip Code 43081	M 0	D 9	Y 1	Amount \$4,300.00
Full Name of Contributor Teresa Wagner				Registration Number, if PAC		
Street Address 1232 Three Forks Drive		Employer/Occupation/Labor Organization* teacher		Form (Cash, Check, etc.) check		
City Westerville	State OH	Zip Code 43081	M 0	D 9	Y 2	Amount \$100.00
Full Name of Contributor Roger Howard				Registration Number, if PAC		
Street Address 136 Cherokee Drive		Employer/Occupation/Labor Organization* retired		Form (Cash, Check, etc.) check		
City Westerville	State OH	Zip Code 43081	M 0	D 9	Y 2	Amount \$50.00
Full Name of Contributor Gregory Mitchell				Registration Number, if PAC		
Street Address 3980 Judson Road		Employer/Occupation/Labor Organization* will be provided ASAP		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43207	M 0	D 9	Y 2	Amount \$100.00
Full Name of Contributor OAPSE Turnaround Ohio PAC LA for Local 719				Registration Number, if PAC will be provided ASAP		
Street Address 6805 Oak Creek Drive		Employer/Occupation/Labor Organization* Labor Organization		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43229	M 0	D 9	Y 3	Amount \$250.00
Full Name of Contributor OAPSE Turnaround Ohio PAC LA for Local 138				Registration Number, if PAC will be provided ASAP		
Street Address 6805 Oak Creek Drive		Employer/Occupation/Labor Organization* Labor Organization		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43229	M 0	D 9	Y 3	Amount \$250.00
Full Name of Contributor Janet Jackson				Registration Number, if PAC		
Street Address 2865 Castlewood Road		Employer/Occupation/Labor Organization* Administrator		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 1	D 0	Y 0	Amount \$100.00
Full Name of Contributor Kathy Cocuzzi				Registration Number, if PAC		
Street Address 1029 Bluesail Drive		Employer/Occupation/Labor Organization* Westerville mayor		Form (Cash, Check, etc.) check		
City Westerville	State OH	Zip Code 43081	M 1	D 0	Y 0	Amount \$50.00

* 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)]

Page Total **\$5,200.00**