

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Our Community Our Schools												
Full Name of Contributor Joan Macrae						Registration Number, if PAC						
Street Address 74 Orchard Lane			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Worthington		State O H		Zip Code 43085		M 1 0		D 2 5		Y 0 9		Amount 100.00
Full Name of Contributor Larry Jenkins						Registration Number, if PAC						
Street Address 211 E Shrock Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Westerville		State O H		Zip Code 43081		M 1 0		D 2 5		Y 0 9		Amount 200.00
Full Name of Contributor Amy Erath						Registration Number, if PAC						
Street Address 4245 Park Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Gahanna		State O H		Zip Code 43230		M 1 0		D 2 5		Y 0 9		Amount 50.00
Full Name of Contributor Tamara Pusateri						Registration Number, if PAC						
Street Address 6607 Shady Oaks Place			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Westerville		State O H		Zip Code 43082		M 1 0		D 2 5		Y 0 9		Amount 25.00
Full Name of Contributor Kathleen Kosinski						Registration Number, if PAC						
Street Address 8014 Lakelooop Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Westerville		State O H		Zip Code 43081		M 1 0		D 2 5		Y 0 9		Amount 40.00
Full Name of Contributor Elizabeth Stimer						Registration Number, if PAC						
Street Address 534 S Spring Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Westerville		State O H		Zip Code 43081		M 1 0		D 2 5		Y 0 9		Amount 44.00
Full Name of Contributor Eric Nelson						Registration Number, if PAC						
Street Address 4533 Big Walnutview Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Gahanna		State O H		Zip Code 43230		M 1 0		D 2 5		Y 0 9		Amount 76.00
Full Name of Contributor Tami Santa						Registration Number, if PAC						
Street Address 6037 Abba Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check					
City Westerville		State O H		Zip Code 43081		M 1 0		D 2 5		Y 0 9		Amount 55.00

* 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 \$ 590.00