Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full						
Our Community Our Scho	ools					
Full Name of Contributor		·····	Registi	ation Nur	ber, if PA	AC .
Street Address	Employer/Occup	pation/Labor Organizatio	n*			Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor			Regist	ation Nun	iber, if PA	C
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code		D	Y	Amount
Full Name of Contributor	Registration Number, if Pa					AC
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
Pull Name of Contributor Registration Number					iber, if PA	AC .
Street Address	Employer/Occup	pation/Labb Organizatio	n*			Fonn (Cash, Check, etc.)
City	State	Zhe Code	M	D +	Y	Amount
Full Name of Contributor	(4	2	Registi	ation Nun	iber, if PA	C
Street Address	Employer/Occur	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor Registration Number					nber, if PA	NC .
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
City	State	Zip Code	М	D	Ϋ́	Amount
Full Name of Contributor	Registration				iber, if PA	AC .
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
City	State	Zíp Code	М	D	Y	Amount
Full Name of Contributor	· ···		Registr	ration Nun	iber, if PA	AC
Street Address	Employer/Occu	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 \$	0.00