

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Our Community, Our Schools									
Full Name of Contributor Amy Miller						Registration Number, if PAC			
Street Address 1629 Six Point Court			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) credit card		
City Worthington			State O H		Zip Code 43085		M D Y 0 4 2 0 0 9		Amount 50.00
Full Name of Contributor Brent Foley						Registration Number, if PAC			
Street Address 33 N Trine Street			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) credit card		
City Canal Winchester			State O H		Zip Code 43011		M D Y 0 4 2 0 0 9		Amount 100.00
Full Name of Contributor David Price						Registration Number, if PAC			
Street Address 3583 Pamela Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) credit card		
City Gahanna			State O H		Zip Code 43230		M D Y 0 4 2 0 0 9		Amount 100.00
Full Name of Contributor Peter Macrae						Registration Number, if PAC			
Street Address 74 Orchard Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) credit card		
City Worthington			State O H		Zip Code 43085		M D Y 0 4 2 1 0 9		Amount 100.00
Full Name of Contributor Name not provided on website						Registration Number, if PAC			
Street Address under investigation			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) credit card		
City			State		Zip Code		M D Y 0 4 0 8 0 9		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

* 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 \$ 375.00