Page	39
1 46-	<u></u>

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Our Community Our Schools Full Name of Contributor			Registrat	ion Num	her if PA	\C	
			Rogistia	JOH HUIH	001, 11 1 1		
Amy Frankenburg Street Address	Employer/Occur	oation/Labor Organization*		tion of the state		Form (Cash, Che	ck. etc.)
	Employer/Occup	oauon/Lavor Organization*				Check	on, 000.j
6697 Springview Drive		Zip Code	М	D	Y	Amount	
City	State H	1	1	D O LO		Amount	50.00
Westerville	I O H	43082	1 0	0 9	0 9		30.00
Full Name of Contributor			Registra	non Num	ber, ii PA	AC .	
Jeff Sadler	(0)					Farry (Cash Cha	-14
Street Address	Employer/Occup	oation/Labor Organization*				Form (Cash, Che	ck, etc.)
8086 Parsons Pass						Check	
City	State	Zip Code	M	D	Y	Amount	40.00
New Albany		43054	CAZAZA PORTONIANOS PRODUCTOS	0 9			10.00
Full Name of Contributor			Registra	tion Num	ber, if PA	AC	
Ryan Borland				VOLUMBA DE SERVICIO DE SER			
Street Address	Employer/Occup	oation/Labor Organization*				Form (Cash, Che	ck, etc.)
3939 Sunbury Road						Check	
City	State	Zip Code	М	D	Y	Amount	
Galena	O H	43021		0 9			75.00
Full Name of Contributor			Registra	tion Num	ber, if P	AC	
Philip Louden							
Street Address	Employer/Occup	oation/Labor Organization*				Form (Cash, Che	ck, etc.)
7105 Hilmar Drive					,	Check	
City	State	Zip Code	М	D	Y	Amount	
Westerville	OH	43082		0 9			50.00
Full Name of Contributor			Registra	tion Num	ber, if Pa	AC	
Marsha Siefker					omilioninioni obsessioni	W4000000000000000000000000000000000000	
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Che	ck, etc.)
761 Woodbend Drive						Check	
City	State	Zip Code	М	D	Y	Amount	
Westerville	OH	43082	1 0	0 9	0 9		20.00
Full Name of Contributor			THE RESERVE THE PROPERTY OF TH	tion Nun	AND DESCRIPTION OF THE PARTY OF	AC	
Danielle Whitehead							
Street Address	Employer/Occu	pation/Labor Organization*	e e e e e e e e e e e e e e e e e e e			Form (Cash, Che	eck, etc.)
1177 Three Forks Drive N						Check	
City	State	Zip Code	М	D	Y	Amount	
Westerville	O H		110	0 9	0 9		50.00
Full Name of Contributor				tion Nun			
Miriam Holmes							
Street Address	Employer/Occu	pation/Labor Organization*	······································			Form (Cash, Che	ck, etc.)
364 Inglewood Drive						Check	
City	State	Zip Code	M	D	Y	Amount	
Westerville	o h	43081	110	0 9	0 9		25.00
Full Name of Contributor	I V I	1 10001		tion Nun		AC	
Stephan Smalley							
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Che	eck, etc.)
5180 Wolf Run Dr	Imployer, occu	L 2. Man a				Check	*
	State	Zip Code	M	l D	Y	Amount	
Calcara	OH	43230		0 9	1	1	100.00
Gahanna	1011	40200		1017	」ひしつ	1	100.00

* 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 \$	380.00