

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Our Community Our Schools							
Full Name of Contributor Maria Petrozzi					Registration Number, if PAC		
Street Address 7012 Churchill Downs Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State O H	Zip Code 43054	M 1	D 1	Y 0	Amount 10.50	
Full Name of Contributor Karen Dupler					Registration Number, if PAC		
Street Address 777 Green Cook Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Sunbury	State O H	Zip Code 43074	M 1	D 1	Y 0	Amount 25.00	
Full Name of Contributor Wendy Novotni					Registration Number, if PAC		
Street Address 3947 Forrest Green Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Baltimore	State O H	Zip Code 43105	M 1	D 1	Y 0	Amount 25.00	
Full Name of Contributor Bradley Graupmann					Registration Number, if PAC		
Street Address 686 Greenwich St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Worthington	State O H	Zip Code 43085	M 1	D 1	Y 0	Amount 150.00	
Full Name of Contributor David Luby					Registration Number, if PAC		
Street Address 6519 Spring Run Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Westerville	State O H	Zip Code 43082	M 1	D 1	Y 0	Amount 750.00	
Full Name of Contributor Andy Ey					Registration Number, if PAC		
Street Address 7672 Danbridge Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 1	D 1	Y 2	Amount 90.00	
Full Name of Contributor Judith Mair					Registration Number, if PAC		
Street Address 3098 Bennington Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43231	M 1	D 1	Y 2	Amount 35.00	
Full Name of Contributor Sue Tennant					Registration Number, if PAC		
Street Address 1415 Wilson Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43206	M 1	D 2	Y 1	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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 1,135.50