

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Our Community Our Schools							
Full Name of Contributor Linda Komlos					Registration Number, if PAC		
Street Address 383 Ashford Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 1 0	D 1 6	Y 0 9	Amount 20.00	
Full Name of Contributor April Mann					Registration Number, if PAC		
Street Address 290 Baldwin Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 1 0	D 1 6	Y 0 9	Amount 100.00	
Full Name of Contributor Shani Lynn Rogers					Registration Number, if PAC		
Street Address 4360 Big Walnutview		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43230	M 1 0	D 1 6	Y 0 9	Amount 15.00	
Full Name of Contributor David Walker					Registration Number, if PAC		
Street Address 573 Peach Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 1 0	D 1 6	Y 0 9	Amount 75.00	
Full Name of Contributor Rebecca Brulport					Registration Number, if PAC		
Street Address 1208 Three Forks Drive S		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 1 0	D 1 6	Y 0 9	Amount 50.00	
Full Name of Contributor Kimberly Buzard					Registration Number, if PAC		
Street Address 291 Cross Country Drive S		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 1 0	D 1 6	Y 0 9	Amount 55.00	
Full Name of Contributor Chad Clark					Registration Number, if PAC		
Street Address 839 Tree Bend Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 1 0	D 1 6	Y 0 9	Amount 50.00	
Full Name of Contributor Jerry Elliott					Registration Number, if PAC		
Street Address 5580 Shiloh Springs Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 1 0	D 1 6	Y 0 9	Amount 150.00	

* 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 \$ 515.00