

# FOR PAPER FILING ONLY

## Statement of Contributions Received

Page 2

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Schuler for School Board</b>						
Full Name of Contributor <b>Valerie L. Grossl</b>				Registration Number, if PAC		
Street Address <b>165 Misty Oak Place</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>chk</b>	
City <b>Gahanna</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43230</b>	M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>100.00</b>
Full Name of Contributor <b>Laura P Clemens</b>				Registration Number, if PAC		
Street Address <b>155 W Main St. Apt 502</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>chk</b>	
City <b>Columbus</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43215</b>	M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>60.00</b>
Full Name of Contributor <b>Kathleen O'Hare</b>				Registration Number, if PAC		
Street Address <b>1009 Zodiac Ave.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>chk</b>	
City <b>Gahanna</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43230</b>	M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>60.00</b>
Full Name of Contributor <b>Amy Boyd</b>				Registration Number, if PAC		
Street Address <b>3951 Clotts Rd.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>chk</b>	
City <b>Gahanna</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43230</b>	M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>60.00</b>
Full Name of Contributor <b>Lewis Griffin</b>				Registration Number, if PAC		
Street Address <b>2737 Colts Neck Rd.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>chk</b>	
City <b>Blacklick</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43004</b>	M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>60.00</b>
Full Name of Contributor <b>Willa Ebersole</b>				Registration Number, if PAC		
Street Address <b>2604 Northmont Dr.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>chk</b>	
City <b>Blacklick</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43004</b>	M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>60.00</b>
Full Name of Contributor <b>Jodi Lemaster</b>				Registration Number, if PAC		
Street Address <b>513 Clotts Rd.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>chk</b>	
City <b>Gahanna</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43230</b>	M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>60.00</b>
Full Name of Contributor <b>Judith Horch</b>				Registration Number, if PAC		
Street Address <b>617 Millwood Ct.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>chk</b>	
City <b>Gahanna</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43230</b>	M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>60.00</b>

\* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total 0 520.00