

FOR PAPER FILING ONLY

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Reset Form

Name of Committee in Full The Committee To Elect Aaron Moore Into The Dublin Board Of Education										
Full Name of Contributor Morgan Burley						Registration Number, if PAC				
Street Address 6950 Concord Bend Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash				
City Powel		State OH ☒	Zip Code 43065		M 0		D 8		Y 0 4 0 9	
Amount 10.00										
Full Name of Contributor Breanna Reys						Registration Number, if PAC				
Street Address 9380 Shawnee Trail			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash				
City Powel		State OH ☒	Zip Code 43065		M 0		D 8		Y 0 4 0 9	
Amount 10.00										
Full Name of Contributor Kaitlyn Gushue						Registration Number, if PAC				
Street Address 573 Haddington Dr.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash				
City Dublin		State OH ☒	Zip Code 43017		M 0		D 8		Y 2 5 0 9	
Amount 10.00										
Full Name of Contributor Hayley Sutphen						Registration Number, if PAC				
Street Address 5832 Levenlinks Ct			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash				
City Dublin		State OH ☒	Zip Code 43017		M 0		D 8		Y 2 5 0 9	
Amount 10.00										
Full Name of Contributor Tara Middlestead						Registration Number, if PAC				
Street Address 8765 Highland Croy			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash				
City Plain City		State OH ☒	Zip Code 43664		M 0		D 8		Y 2 5 0 9	
Amount 10.00										
Full Name of Contributor Kelsey Anderson						Registration Number, if PAC				
Street Address 7522 Tullymore Dr.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash				
City Dublin		State OH ☒	Zip Code 43016		M 0		D 8		Y 2 5 0 9	
Amount 10.00										
Full Name of Contributor Kellie Vaughn						Registration Number, if PAC				
Street Address 7545 Marston Ln			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash				
City Dublin		State OH ☒	Zip Code 43016		M 0		D 8		Y 2 5 0 9	
Amount 20.00										
Full Name of Contributor Carol Moore						Registration Number, if PAC				
Street Address 8127 Aston Way			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash				
City Dublin		State OH ☒	Zip Code 43016		M 0		D 8		Y 2 5 0 9	
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 also appear. [R.C. 3517.10(B)(4)]

Print Form

Page Total 130.00