31-A
R.C. 3517.10

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Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full											
Full Name of Contributor									**Registration Number, if PAC**		
Karen Remy									—		
Street Address	**Employer/Occupation/Labor Organization***									**Form (Cash, Check, etc.)**	
7687 Blacklick Ridge Blvd.	Teacher									Cash	
City	**State**	**Zip Code**			**M**	**D**	**Y**			**Amount**	
Blacklick	OH	43004								10.00	
Full Name of Contributor									**Registration Number, if PAC**		
Dana Kagrise											
Street Address	**Employer/Occupation/Labor Organization***									**Form (Cash, Check, etc.)**	
7236 Boatwright	teacher									Check	
City	**State**	**Zip Code**			**M**	**D**	**Y**			**Amount**	
New Albany	OH	43054								15.00	
Full Name of Contributor									**Registration Number, if PAC**		
Amy Simpson											
Street Address	**Employer/Occupation/Labor Organization***									**Form (Cash, Check, etc.)**	
7855 Blacklick Vw Dr.	Teacher									Check	
City	**State**	**Zip Code**			**M**	**D**	**Y**			**Amount**	
Blacklick	OH	43004								25 00	
Full Name of Contributor									**Registration Number, if PAC**		
Timothy A. Mack											
Street Address	**Employer/Occupation/Labor Organization***									**Form (Cash, Check, etc.)**	
7990 severhill Ct	TEACHER									Check	
City	**State**	**Zip Code**			**M**	**D**	**Y**			**Amount**	
Dublin, OH 43016	OH	43016								20.00	
Full Name of Contributor									**Registration Number, if PAC**		
Brooke Shackelford											
Street Address	**Employer/Occupation/Labor Organization***									**Form (Cash, Check, etc.)**	
322 Park Blvd	Teacher									cash	
City	**State**	**Zip Code**			**M**	**D**	**Y**			**Amount**	
Worthington	OH	43085								5.00	
Full Name of Contributor									**Registration Number, if PAC**		
Kerry M. Fuller											
Street Address	**Employer/Occupation/Labor Organization***									**Form (Cash, Check, etc.)**	
6946 Dean Farm Rd.	Teacher									Cash	
City	**State**	**Zip Code**			**M**	**D**	**Y**			**Amount**	
New Albany	OH	43054								5.00	
Full Name of Contributor									**Registration Number, if PAC**		
Jennifer Walker											
Street Address	**Employer/Occupation/Labor Organization***									**Form (Cash, Check, etc.)**	
163 Vill Edge Dr.	Teacher									Check	
City	**State**	**Zip Code**			**M**	**D**	**Y**			**Amount**	
Granville, OH	OH	43023								20.00	
Full Name of Contributor									**Registration Number, if PAC**		
Hannah Macko											
Street Address	**Employer/Occupation/Labor Organization***									**Form (Cash, Check, etc.)**	
58 E Russell St	Teacher									Cash	
City	**State**	**Zip Code**			**M**	**D**	**Y**			**Amount**	
Columbus	OH	43215								5.00	

* 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)]

Page Total $ 105.00