

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full								
Whitehall Schools Levy Committee					Registration Number, if PAC			
Mark Trace				respond	vii I vuilli	, , , , , , , , , , , , , , , , , , ,	~	
Street Address	Employer/Oc	cupat	tion/Labor Organization	<u> </u>			Form (Cash, Chec	k, etc.)
385 Briarwood Dr	,,	r	<u> </u>				Check	· ′
City	State		Zip Code	М	D	Y	Amount	
Whitehall	0 1	1	43213	1 0	$1 \mid 0$	0 8		100.00
Full Name of Contributor					ition Numl		С	
D. Chris Kondracke								
Street Address	Employer/Occupation/Labor Organization						Form (Cash, Chec	ek, etc.)
2629 E. Broad St					··•		Check	
City	State		Zip Code	М	D	Y	Amount	
Columbus	O 1	1	43209	1 0		0 8		50.00
Full Name of Contributor				Registra	ition Numl	ber, if PA	С	
Dena Maxwell	r		San Water Court 1 C				F (C 1 C'	1 -4- \
Street Address	Employer/Occupation/Labor Organization						Form (Cash, Che	ck, etc.)
26 S. Main St.	State		Zip Code	М	T D	Y	Check Amount	
Craton		н	43013	$\begin{vmatrix} M \\ 1 \end{vmatrix} 0$	1 .		ZMIVUIR	10.00
Croton Full Name of Contributor	IU		43013	THE RESERVE OF THE PERSON NAMED IN	ation Num		C	10.00
Joseph Fairchild				1.051011		~ wa, 12 2 1 1	~	
Street Address	Employer/O	cupa	tion/Labor Organization	<u> </u>			Form (Cash, Che	ck, etc.)
4635 Kae Ave	2000						Cash	
City	State		Zip Code	M	D	Y	Amount	
Whitehall	0	Н	43213	1 0	1 0	0 8		20.00
Full Name of Contributor				THE REAL PROPERTY.	ation Num	Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, which is the Owne	C	· · · · · · · · · · · · · · · · · · ·
Mike Barcus								
Street Address	Employer/Occupation/Labor Organization						Form (Cash, Che	ck, etc.)
382 Briarwood Dr							Cash	
City	State		Zip Code	M	D	Y	Amount	.
Whitehall	O -	H	43213	THE RESIDENCE OF THE PARTY OF T	1 0	0 8	Contract of the Contract of th	50.00
Full Name of Contributor				Registra	ation Num	ber, if PA	.C	
Jessica Fetrow	In. 1 10		4: A -1 O ' .'			***************************************	F (C. 1. C.	-I4- \
Street Address	Employer/O	Employer/Occupation/Labor Organization					Form (Cash, Check, etc.)	
665 Kensington Dr City	State		Zip Code	М	D	Y	Check Amount	
· ·		Н	43230		1 0			20.00
Gahanna Full Name of Contributor			1 040U		ation Num			∠0.00
Alisha and Michael Wilson				1.55,500		, 14 1 1		
Street Address	Employer/O	ccupa	tion/Labor Organization				Form (Cash, Che	ck, etc.)
2040 Fincastle Ct							Check	
City	State		Zip Code	М	D	Y	Amount	
Columbus	0	H	43235	1 0	1 0	0 8		50.00
Full Name of Contributor				THE RESERVE OF THE PARTY OF THE	ation Num			
Loretta Olney								
Street Address	Employer/Occupation/Labor Organization					Form (Cash, Che	ck, etc.)	
4108 Etna St.						Cash		
City	State		Zip Code	М	D	Y	Amount	
Whitehall	0	H	43213	$1 \mid 0$	1 0	0 8		5.00

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 \$ 305.00