

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
The Committee to Elect Jennifer P	riaa							
Full Name of Contributor			Registration Number, if PAC					
Jennifer Price			Acgistia	tion itum	oci, n 17,			
Street Address	Employer/Occur	Employer/Occupation/Labor Organization*				Form (Cash, C	hack etc.)	
	1	1 ' ' '						
1173 Rice Avenue		Communications State Zip Code			1 1/	check		
Gahanna	O H	Zip Code 43230	$\begin{vmatrix} M \\ 0 \end{vmatrix} 2$	$\begin{bmatrix} D \\ 0 \end{bmatrix} 4$	$\begin{vmatrix} \mathbf{Y} \\ 1 \end{vmatrix} 5$	Amount	300.00	
Full Name of Contributor	1				ber, if PA	C		
Susan Jagers								
Street Address	Employer/Occur	Employer/Occupation/Labor Organization*				Form (Cash, C	heck, etc.)	
1543 Wyandotte Road	Initiativ	Initiative Consultin				check		
City	State				Υ	Amount		
Grandview	$O \mid H$	43212	0 2	10	1 5		100.00	
Full Name of Contributor		1021			ber, if PA	C	100.00	
Carl Tisone				•				
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*			_	Form (Cash, Cl	heck, etc.)	
585 Wickham Way	retired	1 • • • • • • • • • • • • • • • • • • •				check		
City	State	Zip Code	М	D	Y	Amount		
Gahanna	ОТН	43230	012	2 3	1 5		200.00	
Full Name of Contributor		10200			ber, if PA	.C	200.00	
Jennifer Collis			1		,			
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Cl	heck, etc.)	
183 Bellebroke Drive	1	St. Matthew School				check	,	
City		State Zip Code		D	ΙΥ	Amount		
Pataskala	OH	43062	$\begin{bmatrix} M \\ 0 \end{bmatrix} 2$	1	l .		250.00	
Full Name of Contributor		10002			ber, if PA	C	200.00	
Melissa Marotta			Ĭ		,			
Street Address	Employer/Occur	Employer/Occupation/Labor Organization*		,	_	Form (Cash, Cl	heck, etc.)	
4019 Prince George Lane						check		
City	State	Zip Code	М	D	ΙΥ	Amount	•	
New Albany	ОН	43054	012	1 9	1 5		75.00	
Full Name of Contributor	101	1 10001			ber, if PA	C	70.00	
Lisa Dawes								
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*				Form (Cash, Cl	heck, etc.)	
1833 Chateaugay Way						check		
City	State	Zip Code	М	D	Y	Amount		
Blacklick	ОІН	43004			1 5		100.00	
Full Name of Contributor		1 10001	Registra	tion Num	ber, if PA	.C	100.00	
Erin Shannon			ľ		,			
Street Address	Employer/Occur	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
8215 Havens Road		Community Relations					check	
City		State Zip Code		D	Y	Amount		
Blacklick	ОІН	43004	0 3	1 2	1 5		150.00	
Full Name of Contributor		1 10001			ber, if PA	.C	100.00	
Steve Price			ľ		,			
Street Address	Employer/Occur	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
1173 Rice Avenue	1 ' '	investment officer				credit		
City	State	Zip Code	М	D	Y	Amount		
Gahanna	ОІН	43230		0 2	l l	[25.00	
	1 ~ !	,	1010		110			

Page Total \$ 1,200.00

^{*} 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)]