

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Lisa Whiting for School Board							
Full Name of Contributor Doug Maggied					Registration Number, if PAC		
Street Address 8982 Roberts Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Galloway	State O H	Zip Code 43119	M 1 0	D 1 8	Y 1 3	Amount 50.00	
Full Name of Contributor Frank Carrier					Registration Number, if PAC		
Street Address 4394 Shire Creek Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Hilliard	State O H	Zip Code 43026	M 1 0	D 2 0	Y 1 3	Amount 100.00	
Full Name of Contributor Tim Hamilton					Registration Number, if PAC		
Street Address 15220 Hagenderfer Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Plain City	State O H	Zip Code 43064	M 1 0	D 2 0	Y 1 3	Amount 100.00	
Full Name of Contributor Committee for Jim Hughes					Registration Number, if PAC		
Street Address 52 E Gay St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 1	D 0 4	Y 1 3	Amount 100.00	
Full Name of Contributor Janet Steitz					Registration Number, if PAC		
Street Address 4370 Dublin Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 1 0	D 2 0	Y 1 3	Amount 100.00	
Full Name of Contributor Libby Gierach					Registration Number, if PAC		
Street Address 4633 Community Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State O H	Zip Code 43026	M 1 0	D 2 1	Y 1 3	Amount 100.00	
Full Name of Contributor Gwen McCartt					Registration Number, if PAC		
Street Address 5068 Waycroft Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State O H	Zip Code 43026	M 1 0	D 1 9	Y 1 3	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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 600.00