

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Plain Local Education Association Political Action Committee							
Full Name of Contributor Lindsay Harrington					Registration Number, if PAC		
Street Address 108 Triesta Pl		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CK		
City Westerville	State OH	Zip Code 43081	M 1	D 0	Y 9	Amount 20⁰⁰	
Full Name of Contributor Heather Woodruff					Registration Number, if PAC		
Street Address 8807 Larchmont Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Pickerington	State OH	Zip Code 43147	M 1	D 0	Y 9	Amount 5.00	
Full Name of Contributor Janette Milligan					Registration Number, if PAC		
Street Address 5155 Heath Gate Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City New Albany	State OH	Zip Code 43054	M 1	D 0	Y 5	Amount 40⁰⁰	
Full Name of Contributor Tirza Cameron					Registration Number, if PAC		
Street Address 4599 Herb Garden Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City New Albany	State OH	Zip Code 43054	M 1	D 0	Y 5	Amount 20⁰⁰	
Full Name of Contributor Paw Elsey					Registration Number, if PAC		
Street Address 3269 Wind Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Lewis Center	State OH	Zip Code 43035	M 1	D 0	Y 5	Amount 20⁰⁰	
Full Name of Contributor Rose Phelps					Registration Number, if PAC		
Street Address 585 Woodmark Run		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Gahanna	State OH	Zip Code 43230	M 1	D 0	Y 5	Amount 20⁰⁰	
Full Name of Contributor Molly Trzebiatowski					Registration Number, if PAC		
Street Address 3445 Ridley Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Columbus	State OH	Zip Code 43228	M 1	D 0	Y 5	Amount 25⁰⁰	
Full Name of Contributor Amy Simpson					Registration Number, if PAC		
Street Address 7855 Blacklick View Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Blacklick	State OH	Zip Code 43004	M 1	D 0	Y 5	Amount 30⁰⁰	

* 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)]