

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Our Community Our Schools							
Full Name of Contributor Katherine Bacso					Registration Number, if PAC		
Street Address 17 Aberdeen Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dayton	State o h	Zip Code 45419	M 0 9	D 3 0	Y 1 1	Amount 25.00	
Full Name of Contributor Jane Burton					Registration Number, if PAC		
Street Address 5556 Longe Cove Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State o h	Zip Code 43082	M 0 9	D 2 8	Y 1 1	Amount 25.00	
Full Name of Contributor Albert Romero					Registration Number, if PAC		
Street Address 1075 Weatherwood Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State o h	Zip Code 43082	M 1 0	D 0 4	Y 1 1	Amount 50.00	
Full Name of Contributor Brian Nichols					Registration Number, if PAC		
Street Address 750 Pepper Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State o h	Zip Code 43082	M 0 9	D 2 9	Y 1 1	Amount 200.00	
Full Name of Contributor Bridget Cargin					Registration Number, if PAC		
Street Address 5449 Lake Shore Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State o h	Zip Code 43082	M 0 9	D 2 9	Y 1 1	Amount 61.00	
Full Name of Contributor Amy Godwin					Registration Number, if PAC		
Street Address 7602 Totten Springs Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State o h	Zip Code 43082	M 0 9	D 3 0	Y 1 1	Amount 10.00	
Full Name of Contributor Annette Christman					Registration Number, if PAC		
Street Address 5599 shannon Heights Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State o h	Zip Code 43016	M 0 9	D 3 0	Y 1 1	Amount 50.00	
Full Name of Contributor Laura Sherrod					Registration Number, if PAC		
Street Address 131 Linabary Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State o h	Zip Code 43081	M 0 9	D 2 9	Y 1 1	Amount 75.00	

* 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)]