

Statement of Contributions Received

Prescribed by Secretary of State 2/01

	Control of the Contro		SOME AND INCOME.	egy at an Danton of Statement and Statement	and the second			
Name of Committee in Full								
Whitehall Schools Levy Committee				Registration Number, if PAC				
Full Name of Contributor Zimmorman School Fauinment Inc.			Kegistr	auon ivum	oci, 11 PA	C		
Zimmerman School Equipment, Inc. Street Address	Employer/Occupa	ation/Labor Organization		<u> Kananananananananananananananananananan</u>	***************************************	Form (Cash, Chec	k. etc.)	
P.O. Box 209	Employer/Occup	mon paper organization				Check	, ••••/	
City	State	Zip Code	M	D	Y	Amount	-,,-	
Blacklick	OH	43004	1	2 8	1 1		500.00	
ull Name of Contributor Registration Number, if						C	200.00	
Berta Johnson								
Street Address	Employer/Occupa	ation/Labor Organization	- Bossesson		entre de la constanta de la co	Form (Cash, Chec	k, etc.)	
2778 Bryden Rd						Check		
City	State	Zip Code	М	D	Y	Amount		
Bexley	OH	43209	1 0	2 8	0 8		90.00	
Full Name of Contributor			encome de constitue de la cons	ation Num		С		
Robert D. Schmidt					VICENTIAN CONTRACTOR			
Street Address	Employer/Occupation/Labor Organization					Form (Cash, Check, etc.)		
4975 Quail Hollow Ln						Check		
City	State	Zip Code	M	D	Y	Amount		
Waldo	$O \mid H$	43356	1 0	THE RESERVE OF THE PERSON NAMED IN			100.00	
Full Name of Contributor			Registra	ation Num	ber, if PA	С		
Dave and Roberta Hegemann						Ippersonancia de la compansión de la com		
Street Address	Employer/Occupation/Labor Organization					B .	Form (Cash, Check, etc.)	
772 Ross Rd		Taylor		1	1	Cash		
City	State	Zip Code	M	D	Y	Amount	20.00	
Whitehall	OH	43213	and the same of th	2 8	attemment and a second	And the control of th	20.00	
Full Name of Contributor Registration Number, if PAC								
Walter and Jean Armes	Employee/Ora	ation/Labor Organization	_L		***************************************	Form (Cash, Chec	ok eta l	
Street Address	Employer/Occupation/Labor Organization					Cash	.r., 610. j	
4010 Etna Rd _{City}	State	Zip Code	М	D	Y	Amount		
Whitehall	OH	43213	$\begin{vmatrix} 1 \\ 1 \end{vmatrix} 0$	1	1	Ē.	14.00	
VV NITERIALI Full Name of Contributor		1 10410	THE PARTY OF THE P	ation Num	an makanahan maka	A CONTRACTOR OF THE PARTY OF TH	17.00	
Mark Trace					, •• • / /			
Street Address	Employer/Occupation/Labor Organization			***************************************		Form (Cash, Chec	ck, etc.)	
385 Briarwood Dr						Cash		
City	State	Zip Code	М	D	Y	Amount		
Whitehall	ОН	43213	1110	2 8	0 8	1	7.00	
Full Name of Contributor				ation Num				
Schorr Architects, Inc.								
Street Address	Employer/Occupation/Labor Organization					Form (Cash, Check, etc.)		
230 Brandenton Ave						Cash		
City	State	Zip Code	M	D	Y	Amount		
Dublin	OH	43017	1 0) 2 8	0 8		21.00	
Full Name of Contributor			Registr	ration Nun	iber, if PA	/C		
Susan Smith				NAME AND ADDRESS OF THE PARTY O	Incorporation and the same			
Street Address	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)				
434 Briarwood Dr						Cash		
City	State	Zip Code	M	D	Y	Amount		
Whitehall	OH	43213	110) 2 8	0 8		15.00	
* D								

* 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 \$ 767.00