

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Cindy Crowe For School Board									
Full Name of Contributor Roxanne Demeter						Registration Number, if PAC			
Street Address 9692 Refugee Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Pataskala	State O H	Zip Code 43062	M 017	D 017	Y 017	Amount 20.00			
Full Name of Contributor James P. Roe						Registration Number, if PAC			
Street Address 26535 Ludwig Dresbach Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Circleville	State O H	Zip Code 43113	M 017	D 017	Y 017	Amount 25.00			
Full Name of Contributor Jeanette Talamo						Registration Number, if PAC			
Street Address 406 Olde English Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 017	D 019	Y 017	Amount 100.00			
Full Name of Contributor Bob Coco						Registration Number, if PAC			
Street Address 1231 Springtree Lane			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 017	D 019	Y 017	Amount 50.00			
Full Name of Contributor Jane Doerr-Robinson						Registration Number, if PAC			
Street Address 6339 Autumn Crest Court			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43080	M 017	D 111	Y 017	Amount 50.00			
Full Name of Contributor Michael Kabler						Registration Number, if PAC			
Street Address 12040 Gorsuch Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 017	D 112	Y 017	Amount 50.00			
Full Name of Contributor Toni Fino						Registration Number, if PAC			
Street Address 6499 Bromfield Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 017	D 114	Y 017	Amount 50.00			
Full Name of Contributor Richard L. Smith						Registration Number, if PAC			
Street Address 7086 Laird Lane			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 017	D 117	Y 017	Amount 25.00			

* 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)]