

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Reimagine Columbus Education</b>							
Full Name of Contributor <b>Robert J. Weiler</b>					Registration Number, if PAC		
Street Address <b>10 N. High Street, Ste. 401</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	M <b>0   6</b>	D <b>2   8</b>	Y <b>1   3</b>	Amount <b>25,000.00</b>	
Full Name of Contributor <b>Smoot Construction Co. of Ohio</b>					Registration Number, if PAC		
Street Address <b>1907 Leonard Avenue</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43219</b>	M <b>0   6</b>	D <b>2   8</b>	Y <b>1   3</b>	Amount <b>25,000.00</b>	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
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Full Name of Contributor					Registration Number, if PAC		
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City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

\* 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)]