## Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full EducateHilliard.org					
Full Name of Contributor  Kerre Kammerer			Registration Number, if )	PAC	
Street Address 3109 Splitrock Rd.	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc. Check	
City Columbus	State OH	Zip Code 43221	0 6 2 9 0 9	Amount \$100.00	
Full Name of Contributor				PAC	
Mark Morscher					
Street Address 3309 Northampton Lane	Employer/Occu	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City Hilliard	State OH	Zip Code 43026	0 6 2 9 0 9	Amount \$20.00	
Full Name of Contributor  Mark Morscher			Registration Number, if PAC		
Street Address 3309 Northampton Lane	Employer/Occu	Employer/Occupation/Labor Organization*			
City Hilliard	State OH	Zip Code 43026	0 7 0 1 0 9	Paypal Amount \$25.00	
Full Name of Contributor Thomas Smith	Registration Number, if P.			AC	
Street Address 5441 Richlanne Dr	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) Paypal	
City Hilliard	State OH	Zip Code 43026	0 7 0 6 0 9	Amount \$100.00	
Full Name of Contributor  Mark Freeman			Registration Number, if PA		
Street Address	Employer/Occur	pation/Labor Organization*		Form (Cash, Check, etc.)	
3784 Kilmuir Dr.		<i>O</i>		Cash	
City Columbus	State OH	Zip Code 43221	0 7 0 6 0 9	Amount \$10.00	
Full Name of Contributor Rick Theissen					
Street Address 4606 Darby Park Rd.	Employer/Occup	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	0 7 1 5 0 9	Amount \$30.00	
Full Name of Contributor  Registra  Mugsy Reynolds				C	
Street Address 4789 Augustus Court	Employer/Occup	Employer/Occupation/Labor Organization®		Form (Cash, Check, etc.) Paypal	
City Hilliard	State OH	Zip Code 43026	0 7 1 8 0 9	Amount \$50.00	
Full Name of Contributor Paul Lambert			Registration Number, if PA	C	
Street Address 7275 Roberts Rd.	Employer/Occup	ation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	M D Y O 9	Amount \$1,000.00	

Page Total \$1,335.00

<sup>\*</sup> 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)]