

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Our Community Our Schools							
Full Name of Contributor Natalie Hildebrandt					Registration Number, if PAC		
Street Address 1188 Blindbrook Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43235	M 0	D 9	Y 2	Amount 42.00	
Full Name of Contributor Susan Kuisel					Registration Number, if PAC		
Street Address 94 East Lincoln Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 0	D 9	Y 2	Amount 65.00	
Full Name of Contributor Jill Kvalheim					Registration Number, if PAC		
Street Address 6905 Four Season Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0	D 9	Y 2	Amount 70.00	
Full Name of Contributor Pamela Charleston					Registration Number, if PAC		
Street Address 5432 Blackhawk Forest Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0	D 9	Y 2	Amount 50.00	
Full Name of Contributor Jennifer Tyler					Registration Number, if PAC		
Street Address 129 Longwood Crossing Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Pataskala	State O H	Zip Code 43062	M 0	D 9	Y 2	Amount 50.00	
Full Name of Contributor Kimberly Cody					Registration Number, if PAC		
Street Address 6309 Interlachen Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0	D 9	Y 2	Amount 40.00	
Full Name of Contributor Daphne Irby					Registration Number, if PAC		
Street Address 5627 Piermont Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State o h	Zip Code 43082	M 0	D 9	Y 2	Amount 43.00	
Full Name of Contributor Danielle Reedy					Registration Number, if PAC		
Street Address 140 Mossman Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 0	D 9	Y 2	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)]

Page Total \$ 385.00