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Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Westerville Education Associat	ion PAC for Schools						
Full Name of Contributor Employee Payroll Deduction (Se	Registr	Registration Number, if PAC					
Street Address	Employer/Occup	Employer/Occupation/Labor Organization Westerville City Schools				Form (Cash, Check, etc.) check	
City	State OH	Zip Code	0 7	D 2 0	0 7	Amount \$130.00	
Full Name of Contributor Employee Payroll Deduction (Se	e attached schedule)		Registr	ation Nu	mber, if P	AC	
Street Address	Employer/Occup	Employer/Occupation/Labor Organization Westerville City Schools			Form (Cash, Check, etc.) check		
City	State	Zip Code	0 9	1 1	0 Y	Amount \$130,00	
Full Name of Contributor Employee Payroll Deduction (Se	e attached schedule)		Registr	ation Nu	mber, if P/	40	
Street Address	, , , ,	ation/Labor Organization* e City Schools				Form (Cash, Check, etc.) check	
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor Employee Payroll Deduction (S	ee attached schedule)		Registr	ation Nu	mber, if P	AC	
Street Address		ation/Labor Organization* e City Schools				Form (Cash, Check, etc.) check	
City	State	Zip Code	M	D	Y	Атоилт	
Full Name of Contributor			Registr	ation Nu	mber, if P/	VC	
Street Address	Employer/Occup	loyer/Occupation/Labor Organization			Form (Cash, Check, etc.)		
City	State OH	Zip Code	M	D	Y	Amount	
Full Name of Contributor			Registr	ation Nu	mber, if P/	NC .	
Street Address	Employer/Occup.	ation/Labor Organization			Form (Cash, Check, etc.)		
City	State OH	Zip Code	M	D	Y	Amount	
Full Name of Contributor			Registr	Registration Number, if PAC			
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State OH	Zip Code	M	D	Y	Amount	
Full Name of Contributor			Registr	ation Nu	nber, if P	AC .	
Street Address	Employer/Occup	ation/Labor Organization				Form (Cash, Check, etc.)	
City	State OH	Zip Code	M	D	Y	Amount	

Page Total \$260.00

^{*} 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 also appear. [R.C. 3517.10(B)(4)]