

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Fishel for Bexley School Board							
Full Name of Contributor Amy Hollingsworth					Registration Number, if PAC		
Street Address 2611 E. Broad St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 	D 	Y 	Amount \$25.00	
Full Name of Contributor Anne Porter					Registration Number, if PAC		
Street Address 51 S. Dawson		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 	D 	Y 	Amount \$20.00	
Full Name of Contributor Gary Hoch					Registration Number, if PAC		
Street Address 2557 E. Broad		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 	D 	Y 	Amount \$25.00	
Full Name of Contributor Nancy Morris					Registration Number, if PAC		
Street Address 99 S. Merkle		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 	D 	Y 	Amount \$25.00	
Full Name of Contributor Shari Speer					Registration Number, if PAC		
Street Address 216 S. Cassingham		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 	D 	Y 	Amount \$25.00	
Full Name of Contributor Ken Blum					Registration Number, if PAC		
Street Address 2444 Bexley Park		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 	D 	Y 	Amount \$25.00	
Full Name of Contributor Jeff Tilson					Registration Number, if PAC		
Street Address 2831 Dale Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 	D 	Y 	Amount \$25.00	
Full Name of Contributor Debbie Sugarman					Registration Number, if PAC		
Street Address 168 S. Merkle		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43209	M 	D 	Y 	Amount \$25.00	

* Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, occupation 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)]

Page Total \$ **\$195.00**