

Statement of Contributions Received

Prescribed by Secretary of State 8/95

Name of Committee in Full <u>New Albany For Kids</u>									
Full Name of Contributor <u>Erin Sloan</u>							Registration Number, if PAC		
Street Address <u>3961 Sweet Shadow Ave</u>				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>check</u>	
City <u>Gahanna</u>		State <u>OH</u>		Zip Code <u>43230</u>		M <u>0</u>		D <u>9</u>	
						Y <u>1</u>		Amount <u>15.00</u>	
Full Name of Contributor <u>Veronica Strujewski</u>							Registration Number, if PAC		
Street Address <u>1314 Haines Ave</u>				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>check</u>	
City <u>Grandview Heights</u>		State <u>OH</u>		Zip Code <u>43212</u>		M <u>0</u>		D <u>9</u>	
						Y <u>1</u>		Amount <u>15.00</u>	
Full Name of Contributor <u>Patrice Archer</u>							Registration Number, if PAC		
Street Address <u>7964 Aspen Ridge Rd</u>				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>check</u>	
City <u>Blacklick</u>		State <u>OH</u>		Zip Code <u>43004</u>		M <u>0</u>		D <u>9</u>	
						Y <u>1</u>		Amount <u>15.00</u>	
Full Name of Contributor <u>Lindsey Diss</u>							Registration Number, if PAC		
Street Address <u>1332 Ida Ave</u>				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>check</u>	
City <u>Columbus</u>		State <u>OH</u>		Zip Code <u>43212</u>		M <u>0</u>		D <u>9</u>	
						Y <u>1</u>		Amount <u>15.00</u>	
Full Name of Contributor <u>Rachel Frilling</u>							Registration Number, if PAC		
Street Address <u>4815 Brandt Circle</u>				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>check</u>	
City <u>Gahanna</u>		State <u>OH</u>		Zip Code <u>43230</u>		M <u>0</u>		D <u>9</u>	
						Y <u>1</u>		Amount <u>15.00</u>	
Full Name of Contributor <u>Denise Killen</u>							Registration Number, if PAC		
Street Address <u>6768 Bowerman St. E</u>				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>check</u>	
City <u>Worthington</u>		State <u>OH</u>		Zip Code <u>43085</u>		M <u>0</u>		D <u>9</u>	
						Y <u>0</u>		Amount <u>15.00</u>	
Full Name of Contributor <u>Annette Andres</u>							Registration Number, if PAC		
Street Address <u>4535 Neiswander Sq</u>				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <u>check</u>	
City <u>New Albany</u>		State <u>OH</u>		Zip Code <u>43054</u>		M <u>0</u>		D <u>9</u>	
						Y <u>1</u>		Amount <u>15.00</u>	

*Required for contributions 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 donate 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 \$ 105.00