

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Groce for Columbus Schools							
Full Name of Contributor Robert Barrow					Registration Number, if PAC		
Street Address 1187 Middleport Dr.		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43235	M 07	D 28	Y 07	Amount 100.00	
Full Name of Contributor Jennifer R. Fry					Registration Number, if PAC		
Street Address 8000 Anderson Park Lane		Employer/Occupation/Labor Organization* Teacher			Form (Cash, Check, etc.) Check		
City Westerville	State OH	Zip Code 43081	M 08	D 01	Y 07	Amount 25.00	
Full Name of Contributor Karen Schwarzwald					Registration Number, if PAC		
Street Address 821 Fox Run Road #8		Employer/Occupation/Labor Organization* Executive			Form (Cash, Check, etc.) Check		
City Findlay	State OH	Zip Code 45840	M 08	D 01	Y 07	Amount 100.00	
Full Name of Contributor Mitchell Casey					Registration Number, if PAC		
Street Address 1351 Neil Avenue		Employer/Occupation/Labor Organization* Estimator			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43201	M 08	D 01	Y 07	Amount 150.00	
Full Name of Contributor Lisa R. Hughes					Registration Number, if PAC		
Street Address 5140 Polar Drive		Employer/Occupation/Labor Organization* Executive - Nationwide Financial			Form (Cash, Check, etc.) Check		
City Lewis Center	State OH	Zip Code 43035	M 08	D 03	Y 07	Amount 200.00	
Full Name of Contributor Kerry Sullivan-Herren					Registration Number, if PAC		
Street Address 1616 Trentwood Road		Employer/Occupation/Labor Organization* Director - Nationwide Financial			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43221	M 08	D 03	Y 07	Amount 100.00	
Full Name of Contributor Ty Marsh					Registration Number, if PAC		
Street Address 57 Riverview Park Drive		Employer/Occupation/Labor Organization* Executive - Columbus Chamber Cmrc			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43214	M 08	D 03	Y 07	Amount 100.00	
Full Name of Contributor Nancy G. Niehoff					Registration Number, if PAC		
Street Address 2020 23rd Ave		Employer/Occupation/Labor Organization* Retired			Form (Cash, Check, etc.) Check		
City Greeley	State CO	Zip Code 80634	M 08	D 04	Y 07	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 \$ **800.00**