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Statement of Contributions Received

Prescribed by Secretary of State 3/05

No. of Complete in Full									
Name of Committee in Full	ARATIC LI C	CRAFTLE TOUAC							
SAVE REYNOLDSBURG SCHOOLS, JAMES H. SMITH, TREAS. Full Name of Contributor				Registration Number, if PAC					
8			ixegisua	tion mun	oci, a r Av	~			
VALERIE ZIELINSKI-MAYER	E1/O	tion/Labor Organization*		N 200 ikan kalendari kan kenan		Form (Cook Cho	ols oto		
Street Address	1				Form (Cash, Check, etc.)				
1660 N CASSIDY AVE	OCCUP			1 5	1 37	CHECK	·		
City	State	Zip Code	M	D	Y	Amount	202.00		
COLUMBUS	O H	43209	0 4		0 9		200.00		
Full Name of Contributor			Registra	tion Num	ber, if PA	U			
JANA ALIG-MIELCAREK				333463333367733633373					
Street Address	Employer/Occupa				Form (Cash, Check, etc.)				
2958 PRINCEVILLE DR	OCCUP				CHECK				
City	State	Zip Code	M	D	Y	Amount			
PICKERINGTON	OH	43147	0 4	1 7	0 9		50.00		
Full Name of Contributor			Registra	tion Num	ber, if PA	C			
VARIOUS DONATIONS- WINDOW (CANTEN AND AND AND AND AND AND AND AND AND AN							
Street Address	Employer/Occupa				Form (Cash, Check, etc.)				
7244 E MAIN ST	OCCUP	,			CASH				
City	State	Zip Code	М	D	Y	Amount	THE PERSON NAMED AND POST OF THE PERSON NAMED		
REYNOLDSBURG		43068	0 4	1 7	0 9		130.00		
Full Name of Contributor			Registra	tion Num	ber, if PA	C			
THOMAS COCHRAN									
Street Address	Employer/Occupa	Form (Cash, Check, etc.)							
529 S 5TH ST	OCCUP.	ATION				CHECK			
City	State	Zip Code	M	D	Y	Amount	Andrewskie Methodologica School (School (Sch		
COLUMBUS	OIH	43206	0 4	2 1	019		100.00		
Full Name of Contributor			tara ng pagambatah na mang		ber, if PA	C.	100.00		
E P JOHNSON					ĺ				
Street Address	Employer/Occupa				Form (Cash, Che	ck etc.)			
1695 KENVIEW RD	OCCUP.	***				CHECK			
City	State	Zip Code	l M	D	Υ	Amount			
COLUMBUS	OIH	43209	014	I .	0 9	/ Intount	50.00		
Full Name of Contributor			ana kanimadana in	deconstruction desired	per, if PA	7	70,00		
KAREN ZALAC			registra	LIGHT I VALLE	ou, n i A	_			
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Che	alc ata \		
680 HARTFORD ST	OCCUP.								
City	State	Zip Code	М	D	Y	CHECK Amount			
WORTHINGTON	O I H	43085	l			1	100.00		
Full Name of Contributor		43003	0 4		0 9 per, if PAC		100.00		
			Kegistra	non Num	oer, 11 PAG	j			
MITCH BIEDERMAN Street Address	Ir. 1. (0	tion/Labor Organization*	_L						
	1				Form (Cash, Check, etc.)				
311 WAGGONER RD	OCCUP.		, monthe management of the second	7		CASH			
City	State	Zip Code	M	D	Y	Amount	W 20		
REYNOLDSBURG	0 H	43068	0 4		0 9		50.00		
Full Name of Contributor			Registrat	tion Num	oer, if PAC				
RONALD STRUSSION	againti de la commentación de la commencia de								
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
1730 GRAHAM RD	OCCUPATION			garan 2000 ta		CHECK			
City	State	Zip Code	М	D	1 8	Amount			
REYNOLDSBURG			0 4	3 0	0 9		150.00		

Page Total \$ 830.00	
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^{*} 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)]