

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full							
Plain Local Education Association Political Action Committee							
Full Name of Contributor				Registration Number, if PAC			
Nate Krul							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
7265 Dean Farm Rd.				Cash			
City		State	Zip Code	M	D	Y	Amount
New Albany		OH	43054	1	0	15	50 ⁰⁰
Full Name of Contributor				Registration Number, if PAC			
Lori McNichols							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
357 Imperial Dr.				ck			
City		State	Zip Code	M	D	Y	Amount
Gahanna		OH	43230	1	0	19	100 ⁻
Full Name of Contributor				Registration Number, if PAC			
Cathy Lindenmuth							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
4266 Harlem Rd.				ck			
City		State	Zip Code	M	D	Y	Amount
Galena		OH	43021	1	0	19	100 ⁻
Full Name of Contributor				Registration Number, if PAC			
Mary Cook							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
16 Bricon Circle				cash			
City		State	Zip Code	M	D	Y	Amount
Granville		OH	43023	1	0	19	20 ⁰⁰
Full Name of Contributor				Registration Number, if PAC			
Tim Bush							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
5430 Haussman Pl				cash			
City		State	Zip Code	M	D	Y	Amount
Westerville		OH	43081	1	0	17	5 ⁰⁰
Full Name of Contributor				Registration Number, if PAC			
Jeff Bennett							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
14860 E St. Rt. 37				cash			
City		State	Zip Code	M	D	Y	Amount
Sunbury		OH	43074	1	0	17	10 ⁰⁰
Full Name of Contributor				Registration Number, if PAC			
Vicki Losinski							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
7654 Aspinwall N.				ck			
City		State	Zip Code	M	D	Y	Amount
New Albany		OH	43054	1	0	17	50 ⁰⁰
Full Name of Contributor				Registration Number, if PAC			
Jeanette Aslanian							
Street Address		Employer/Occupation/Labor Organization		Form (Cash, Check, etc.)			
6388 L. Albong Bute				cash			
City		State	Zip Code	M	D	Y	Amount
Columbus		OH	43228	1	0	17	10 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)]