

# FOR PAPER FILING ONLY

## Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Schuler for School Board</b>							
Full Name of Contributor <b>Paula Schuler</b>					Registration Number, if PAC		
Street Address <b>185 Brookhill Dr.</b>		Employer/Occupation/Labor Organization* <b>none</b>			Form (Cash, Check, etc.) <b>check</b>		
City <b>Gahanna</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43230</b>	M <b>0</b>	D <b>8</b>	Y <b>2</b>	Amount <b>20.00</b>	
Full Name of Contributor <b>Lee Roy Bentley</b>					Registration Number, if PAC		
Street Address <b>410 Braemer Ct.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>check</b>		
City <b>Gahanna</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43230</b>	M <b>0</b>	D <b>8</b>	Y <b>2</b>	Amount <b>250.00</b>	
Full Name of Contributor <b>Citizens for Anne Gonzales</b>					Registration Number, if PAC		
Street Address <b>865 Macon Alley</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>chk</b>		
City <b>Columbus</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43206</b>	M <b>0</b>	D <b>9</b>	Y <b>1</b>	Amount <b>250.00</b>	
Full Name of Contributor <b>Citizens for Anne Gonzales</b>					Registration Number, if PAC		
Street Address <b>865 Macon Alley</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>chk</b>		
City <b>Columbus</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43206</b>	M <b>0</b>	D <b>9</b>	Y <b>2</b>	Amount <b>750.00</b>	
Full Name of Contributor <b>Committee for Jim Hughes</b>					Registration Number, if PAC		
Street Address <b>52 E Gay Street</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>chk</b>		
City <b>Columbus</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43215</b>	M <b>0</b>	D <b>9</b>	Y <b>2</b>	Amount <b>500.00</b>	
Full Name of Contributor <b>Krista Weida</b>					Registration Number, if PAC		
Street Address <b>625 Crossing Creek S</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>chk</b>		
City <b>Gahanna</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43230</b>	M <b>0</b>	D <b>9</b>	Y <b>2</b>	Amount <b>40.00</b>	
Full Name of Contributor <b>Shane Ewald</b>					Registration Number, if PAC		
Street Address <b>126 Walnut St.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>chk</b>		
City <b>Gahanna</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43230</b>	M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Heather Bishoff</b>					Registration Number, if PAC		
Street Address <b>2902 Braden Way</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>chk</b>		
City <b>Blacklick</b>	State <b>OH</b> <input checked="" type="radio"/>	Zip Code <b>43004</b>	M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>250.00</b>	

\* 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)]

Page Total **2160.00**