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Statement of Contributions Received

Prescribed by Secretary of State 8/95

Name of Committee in Full			out Consession or new Angelon		and the special of th	FIRGS to emarks		BOOKEN HELITAGE	thicking recover	parameter consister of the constant of the con	
New Albany For Kids											
Full Name of Contributor		and the second second				Name and Associated Spirit	Warranger - NAM	SSOCIA ESTABLISMO DE LA CONTRACTOR DE LA C	0500500mm		
.Rex Reeder							Reg	gistratio	n Nur	nber, if	PAC
Street Address		1	Employe	or/Occupation/Labor Organization	n*		L	DECOMES DECEMBE	SANCES SERVICES	Stationski Salarana	
119 Stone Creek Drive	*************************************		Digroy.		1.						Form (Cash, Check, etc.) Check
Granville	State	l	H	Zip Code 43023	М 0	8	D 2	T ₅	Y	T	Amount
Full Name of Contributor	1	remarks.		173023	L	0	and the same of the same of	earline man	0	8	\$100.00
Elect Klein School Board							Keg	istratio	ı Nun	aber, if	PAC
Street Address		\neg	Employe	r/Occumation/ shor Organization	. sk		L		Market State		
5667 Jersey Drive			Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)			
City	T	State		71733		1	~~~~	~~~~~	·		check
New Albany	0		H	Zip Code 43054	0 M	8	2 D) 1	Y	1 1	Amount
Full Name of Contributor				115051	L	G			10	8	\$200.00
Jon Stonebraker							Keg	istration	ı Nun	iber, if	PAC
Street Address		T	Employe	r/Occupation/Labor Organization	*		-		ACCUPATION OF	Single-service of	Form (Cash, Check, etc.)
2181 North State Route 61											TOTAL (Casis, Check, etc.)
City					···				providence2544		check
Sunbury	lo	State F		Zip Code	M		D	1 1	Y		Amount
Full Name of Contributor	L	I	l	43074-9401	0	8	2	4	0	8	\$250.00
Carole D. Bell							Regi	stration	Num	ber, if	PAC
Street Address			Employe	/Occupation/Labor Organization	*		- Business				Form (Cash, Check, etc.)
3030 Waterford Drive											
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Full Name of Contributor	distribution of the same	warden or		11000			niconara mana	okumeno o mand	CONTACTOR OF THE	8	\$200.00
Diane Goedeking							regn	stration	Num	ber, 11 l	PAC
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7655 Wilbur Road				•							1 om (own, onces, etc.)
City	T		V			r		·			check
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Full Name of Contributor		1.1		143034	I V	7	0	4	0	8	\$250.00
Kevin Currier							Regis	stration	Num	ber, if F	PAC PAC
Street Address		T	Employer	Occupation/Labor Organization	ķ		National Confession of the Con		AND CONTRACTORS		Form (Cash, Check, etc.)
4353 Oaks Shadow Drive		Paragona and a									Point (Casil, Citeor, Bit.)
Clar	7******************************		***************************************			····		***************************************	***************************************		check
^{City} New Albany		State	r	Zip Code	M	_	D		Y		Amount
Full Name of Contributor	0	H		43054	0	9		SERVICE SERVICES	0	San System to committee	\$50.00
Alison Miller							Regis	stration	Numl	per, if P	PAC PAC
Street Address		T,	71	(0							
4432 Cohagen Crossing Drive		12	unpioyer/	Occupation/Labor Organization*	•						Form (Cash, Check, etc.)
			***************************************								check
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New Albany	0	H		43054	0	9	0	3	0	8	\$50.00
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Page Total \$ 1,100.00			
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rage lotal 5 littlette	Page Total	\$ 1,100.00	

^{*}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)