

FOR PAPER FILING ONLY

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full The Committee To Elect Aaron Moore Into The Dublin Board Of Education									
Full Name of Contributor Morgan Burley							Registration Number, if PAC		
Street Address 6950 Concord Bend Rd				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City Powel		State OH <input checked="" type="radio"/>		Zip Code 43065		M D Y 0 8 0 4 0 9		Amount 10.00	
Full Name of Contributor Breanna Reys							Registration Number, if PAC		
Street Address 9380 Shawnee Trail				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City Powel		State OH <input checked="" type="radio"/>		Zip Code 43065		M D Y 0 8 0 4 0 9		Amount 10.00	
Full Name of Contributor Kaitlyn Gushue							Registration Number, if PAC		
Street Address 573 Haddington Dr.				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City Dublin		State OH <input checked="" type="radio"/>		Zip Code 43017		M D Y 0 8 2 5 0 9		Amount 10.00	
Full Name of Contributor Hayley Sutphen							Registration Number, if PAC		
Street Address 5832 Levenlinks Ct				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City Dublin		State OH <input checked="" type="radio"/>		Zip Code 43017		M D Y 0 8 2 5 0 9		Amount 10.00	
Full Name of Contributor Tara Middlestead							Registration Number, if PAC		
Street Address 8765 Highland Croy				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City Plain City		State OH <input checked="" type="radio"/>		Zip Code 43664		M D Y 0 8 2 5 0 9		Amount 10.00	
Full Name of Contributor Kelsey Anderson							Registration Number, if PAC		
Street Address 7522 Tullymore Dr.				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City Dublin		State OH <input checked="" type="radio"/>		Zip Code 43016		M D Y 0 8 2 5 0 9		Amount 10.00	
Full Name of Contributor Kellie Vaughn							Registration Number, if PAC		
Street Address 7545 Marston Ln				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City Dublin		State OH <input checked="" type="radio"/>		Zip Code 43016		M D Y 0 8 2 5 0 9		Amount 20.00	
Full Name of Contributor Carol Moore							Registration Number, if PAC		
Street Address 8127 Aston Way				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City Dublin		State OH <input checked="" type="radio"/>		Zip Code 43016		M D Y 0 8 2 5 0 9		Amount 50.00	

* 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)]

130.00