

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full BRESSMAN FOR BOARD									
Full Name of Contributor WEA POLITICAL ACTION COMMITTEE							Registration Number, if PAC		
Street Address 6840 DOWNS STREET				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK	
City WORTHINGTON		State OH		Zip Code 43085		M 1		D 0	
						Y 1		Amount \$1,000.00	
Full Name of Contributor MARLA JONES							Registration Number, if PAC		
Street Address 1615 FALLHAVEN DRIVE				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK	
City COLUMBUS		State OH		Zip Code 43235		M 1		D 0	
						Y 2		Amount \$100.00	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						Y		Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						Y		Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						Y		Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						Y		Amount	
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City		State OH		Zip Code		M		D	
						Y		Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						Y		Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						Y		Amount	

* 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 **\$1,100.00**