

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Halliday for School Board							
Full Name of Contributor Stephen and Carol Handler						Registration Number, if PAC	
Street Address 2391 Sherwood Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley			State OH	Zip Code 43209	M 09	D 29	Y 07 Amount 25.00
Full Name of Contributor Drew and Amy Giller Stark						Registration Number, if PAC	
Street Address 2468 Elm Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley			State OH	Zip Code 43209	M 09	D 29	Y 07 Amount 25.00
Full Name of Contributor Tim Madison						Registration Number, if PAC	
Street Address 2753 Sherwood Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley			State OH	Zip Code 43209	M 10	D 02	Y 07 Amount 50.00
Full Name of Contributor John and Karla Barrio						Registration Number, if PAC	
Street Address 2710 Dale Avenue			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley			State OH	Zip Code 43209	M 10	D 02	Y 07 Amount 25.00
Full Name of Contributor Susan Marantz and Roger Carroll						Registration Number, if PAC	
Street Address 442 N. Drexel Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley			State OH	Zip Code 43209	M 10	D 02	Y 07 Amount 50.00
Full Name of Contributor Peter and Suzanne Klingelhofer						Registration Number, if PAC	
Street Address 2355 Sherwood Rd.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley			State OH	Zip Code 43209	M 10	D 02	Y 07 Amount 20.00
Full Name of Contributor Bob and Bev Darwin						Registration Number, if PAC	
Street Address 185 S. Columbia Ave.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley			State OH	Zip Code 43209	M 10	D 02	Y 07 Amount 25.00
Full Name of Contributor Chris and Katrina Scaggins						Registration Number, if PAC	
Street Address 2409 Sherwood Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Bexley			State OH	Zip Code 43209	M 10	D 02	Y 07 Amount 25.00

* 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)]