

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Retain Charlie Wilson For THE Worthington School Board Committee							
Full Name of Contributor Jennifer Best				Registration Number, if PAC			
Street Address 2168 Sutter Parkway		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43016	M 10	D 10	Y 07	Amount 25.00	
Full Name of Contributor David Bressman				Registration Number, if PAC			
Street Address 8633 Brozdaire Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Powell	State OH	Zip Code 43065	M 08	D 25	Y 07	Amount 50.00	
Full Name of Contributor Jennifer Engle				Registration Number, if PAC			
Street Address 4851 Moreland Dr. W		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43220	M 10	D 12	Y 07	Amount 50.00	
Full Name of Contributor Howard Fink				Registration Number, if PAC			
Street Address 6385 Quarry Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43017	M 10	D 04	Y 07	Amount 100.00	
Full Name of Contributor Larry Garvin				Registration Number, if PAC			
Street Address 2775 Fair Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Bexley	State OH	Zip Code 43209	M 10	D 01	Y 07	Amount 50.00	
Full Name of Contributor Lawrence Herman				Registration Number, if PAC			
Street Address 1000 Urtin Ave #1619		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43212	M 10	D 17	Y 07	Amount 50.00	
Full Name of Contributor Richard Igo				Registration Number, if PAC			
Street Address 3300 Indianola Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43214	M 09	D 04	Y 07	Amount 50.00	
Full Name of Contributor Mary J. Kilroy				Registration Number, if PAC			
Street Address 3100 Midgard Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43202	M 09	D 23	Y 07	Amount 100.00	

* 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 appear. (R.C. 3517.10(B)(4))

Page Total \$ 475.00