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Statement of Contributions Received

Prescribed by Secretary of State 3/05

						D22(0)))200(0)			
Name of Committee in Full									
SAVE REYNOLDSBURG SCHOOL	S				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
full Name of Contributor			Registration Number, if PAC						
CHRISTOPHER SMITH						(Managara and Amagara and Amag			
Street Address	Employer/Occupa	· · · · · · · · · · · · · · · · · · ·			Form (Cash, Check, etc.)				
393 RAMBLING BROOK DR	OCCUP	CI:			CHEC	CK			
City	State	Zip Code	М	D	Y	Amount			
PICKERINGTON	OH	43147	0 3	2 8	0 9		500.00		
Full Name of Contributor			Registra	tion Numl	ber, if PA	С	Control of the Contro		
LEE GRAY									
Street Address	Employer/Occup		nerodiikeroon	anna y en Sendere College (freih	Form (Cash,	Check, etc.)			
548 RAMBLING BROOK DR	OCCUP	OCCUPATION				CHECK			
City	State	Zip Code	M	D	Y	Amount			
PICKERINGTON	OH	43147	0 3	2 8	0 9		500.00		
Full Name of Contributor					Registration Number, if PAC				
PEPPLE & WAGGONER, LTD									
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
5005 OCKSIDE RD, STE 260		OCCUPATION				CHECK			
City	State	Zip Code	М	D	Y	Amount	J. V.		
CLEVELAND	OIH	44131	0 3	l	1		2,000.00		
Full Name of Contributor		TILOL	CONTRACTOR OF THE PARTY OF THE	tion Num		C	,		
MOODY NOLAN, INC									
Street Address	Employer/Occup	ation/Labor Organization*			raspector and a second	Form (Cash,	Check etc.)		
					CHECK				
300 SPRUCE ST	State	OCCUPATION State Zip Code		D	Y	Amount	_1\		
COLLINABLE		1 -	M	1		Amount	2,000.00		
COLUMBUS	TO H	43215		2 8 tion Num		C	۵,000.00		
Full Name of Contributor			Registra	uon num	bei, ii PA	.C			
JANELLE MORRISON	Tr. 1 (0)					Esses (Coals	Charle etc.)		
Street Address	· · · · · · · · · · · · · · · · · · ·	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
243 WINDSOR DR	OCCUP		1		r	CHEC			
City	State	Zip Code	M	D	Y	Amount	400.00		
REYNOLDSBURG	OH	43068	0 3		0 9		100.00		
Full Name of Contributor			Registra	tion Num	ber, if PA	.C			
ANNETTE NIJSSEN				ALCONOMINA SURVINO		n (0.1			
Street Address	Employer/Occup				Form (Cash, Check, etc.)				
2828 SPINNAKER LOOP	OCCUP				CHECK				
City	State	Zip Code	M	D	Y	Amount	400.00		
REYNOLDSBURG	D H	43068		2 8			100.00		
Full Name of Contributor			Registra	tion Num	ber, if PA	.C			
CATHERINE BREGAR				(2000-1000-1000-1000-1000-1000-1000-1000					
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)			
7263 BRIDLESPUR LN	OCCUP	ATION				CHE	IK		
City	State	Zip Code	М	D	Y	Amount			
DELAWARE	0 H	43015	0 3	2 8	0 9		100.00		
Full Name of Contributor			Registra	tion Num	ber, if PA	C			
LESLIE KELLY				Number			***************************************		
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
7410 DAUGHERTY RD	OCCUP				CHECK				
City	State	Zip Code	М	D	Y	Amount .			
REYNOLDSBURG	OH	43068	10/3	2 8	0 9		50.00		

Page Total \$ 5,350.00

^{*} 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)]