

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Our Community Our Schools									
Full Name of Contributor Emily Considine						Registration Number, if PAC			
Street Address 4799 Mockingbird Court S			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O	H H	Zip Code 43229	M 0	D 9	Y 2	Amount 25.00		
Full Name of Contributor Deborah Corey						Registration Number, if PAC			
Street Address 2360 Rufus Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Lewis Center	State O	H H	Zip Code 43035	M 0	D 9	Y 2	Amount 75.00		
Full Name of Contributor Teresa Wagner						Registration Number, if PAC			
Street Address 1232 Three Forks Dr S			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O	H H	Zip Code 43081	M 0	D 9	Y 2	Amount 58.00		
Full Name of Contributor Chuck Amstutz						Registration Number, if PAC			
Street Address 663 Kienle Ave			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O	H H	Zip Code 43081	M 0	D 9	Y 2	Amount 50.00		
Full Name of Contributor Mike Denney						Registration Number, if PAC			
Street Address 6006 Turnwood Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O	H H	Zip Code 43081	M 0	D 9	Y 2	Amount 50.00		
Full Name of Contributor Michele Gelzleichter						Registration Number, if PAC			
Street Address PO Box 165			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O	H H	Zip Code 43081	M 0	D 9	Y 2	Amount 45.00		
Full Name of Contributor A. R. Liao						Registration Number, if PAC			
Street Address 291 St Thomas Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State o	H h	Zip Code 43081	M 0	D 9	Y 2	Amount 25.00		
Full Name of Contributor Lisa Lunn						Registration Number, if PAC			
Street Address 170 E Selby Blvd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Worthington	State O	H H	Zip Code 43085	M 0	D 9	Y 2	Amount 45.00		

* 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 \$ 373.00