

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Our Community Our Schools							
Full Name of Contributor Lauterbach & Eilber, Inc.					Registration Number, if PAC		
Street Address 1721 Bethel Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus,	State O H	Zip Code 43220	M 0 9	D 2 6	Y 1 1	Amount 500.00	
Full Name of Contributor Lepi Enterprises, Inc.					Registration Number, if PAC		
Street Address 630 G W Morse St. P.O. Box457		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Zanesville,	State O H	Zip Code 43702	M 0 9	D 2 8	Y 1 1	Amount 250.00	
Full Name of Contributor Louis R. Polster Co.					Registration Number, if PAC		
Street Address P.O. Box 2016		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus,	State O H	Zip Code 43216	M 0 9	D 2 7	Y 1 1	Amount 250.00	
Full Name of Contributor Cardinal Bus Sales & Service, Inc.					Registration Number, if PAC		
Street Address 6280 Harding Highway, St. Rt. 309 E.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Lima,	State O H	Zip Code 45801	M 0 9	D 2 7	Y 1 1	Amount 250.00	
Full Name of Contributor Sarah Shaffer					Registration Number, if PAC		
Street Address 230 Leland Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Columbus,	State O H	Zip Code 43214	M 0 9	D 2 8	Y 1 1	Amount 50.00	
Full Name of Contributor Julie Krizay					Registration Number, if PAC		
Street Address 3002 Dublin Arbor Ln.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Dublin,	State O H	Zip Code 43017	M 0 9	D 2 8	Y 1 1	Amount 50.00	
Full Name of Contributor John Winner					Registration Number, if PAC		
Street Address 145 Sandstone Loop W.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Westerville,	State O H	Zip Code 43081	M 0 9	D 2 8	Y 1 1	Amount 50.00	
Full Name of Contributor Robert Hoffman					Registration Number, if PAC		
Street Address 106 Executive Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Credit Card		
City Westerville,	State O H	Zip Code 43081	M 0 9	D 2 8	Y 1 1	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)]