31-A R.C. 3517.10

FOR PAPER FILING ONLY Statement of Contributions Received

	3
Page	

Prescribed by Secretary of State 03/05

Name of Committee in Full Return Nancy Nestor-Baker to S	School Board			
Full Name of Contributor	School Board	Registration Number, if I	PAC	
Phyllis Magold				
Street Address 4696 Smothers Road	Employer/Occupation/Labor Organization retired		Form (Cash, Check, etc.) check	
City Westerville	State Zip Code 43081	M D Y 1 0 0 5 1 3	Amount \$200.00	
Full Name of Contributor Helen Chan		Registration Number, if I	PAC	
Street Address 175 Granby Place	Employer/Occupation/Labor Organization Volunteer		Form (Cash, Check, etc.) Pay Pal	
^{City} Westerville	State Zip Code 43081	1 0 0 8 1 3	Amount \$50.00	
Full Name of Contributor Janet Ravneberg	· · · · · · · · · · · · · · · · · · ·	Registration Number, if F	PAC	
Street Address 5642 Moorgate Drive	Employer/Occupation/Labor Organization will be provided ASAP	<u></u>	Form (Cash, Check, etc.)	
City Columbus	State Zip Code 43235	1 0 0 7 1 3	Amount \$50.00	
Full Name of Contributor Scott Ebbrecht		Registration Number, if F	PAC	
Street Address 392 Inglewood Drive	Employer/Occupation/Labor Organization* administrator		Form (Cash, Check, etc.) Pay Pal	
City Westerville	State Zip Code OH 43081	1 0 0 8 1 3	Amount \$50.00	
Full Name of Contributor Chris Beckel		Registration Number, if F	AC	
Street Address 6615 Montchanin Court	Employer/Occupation/Labor Organization* will be provided ASAP		Form (Cash, Check, etc.) Pay Pal	
City Westerville	State Zip Code 43082	1 0 1 1 1 3	Amount \$50.00	
Full Name of Contributor Cheryl Hoffman Registration Number, if PAC				
Street Address 106 Executive Court	Employer/Occupation/Labor Organization* will be provided ASAP	_	Form (Cash, Check, etc.) Pay Pal	
City Westeville	State Zip Code 43081	1 0 1 1 1 3	Amount \$25.00	
Full Name of Contributor Janet McMeekin		Registration Number, if P	AC	
Street Address 7333 Timberlake Drive	Employer/Occupation/Labor Organization* will be provided ASAP		Form (Cash, Cheek, etc.) Pay Pal	
City Westerville	State Zip Code 43081	M D Y 1 0 1 5 1 3	Amount \$20.00	
Full Name of Contributor Registration Number, if PAC				
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State Zip Code OH	M D Y	Amount	

^{*} 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)]