

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Grandview Heights Schools									
Full Name of Contributor Bricker & Eckler LLP State Political Action Committee						Registration Number, if PAC OH821			
Street Address 100 S. Third St.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 1	D 0	Y 0	Y 6	Amount \$100.00
Full Name of Contributor Kristine Urig						Registration Number, if PAC			
Street Address 840 Aldengate Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Galloway		State OH	Zip Code 43119		M 1	D 0	Y 0	Y 9	Amount \$20.00
Full Name of Contributor Lupton Rausch Architects						Registration Number, if PAC			
Street Address 430 S. Front Street			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State OH	Zip Code 43215		M 1	D 0	Y 0	Y 9	Amount \$1,500.00
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State OH	Zip Code		M	D	Y	Amount	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State OH	Zip Code		M	D	Y	Amount	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State OH	Zip Code		M	D	Y	Amount	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State OH	Zip Code		M	D	Y	Amount	
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State OH	Zip Code		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)]