

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Our Community, Our Schools</b>									
Full Name of Contributor <b>Robert Frost PTA</b>						Registration Number, if PAC			
Street Address <b>270 N Spring Road</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>check</b>		
City <b>Westerville</b>		State <b>O   H</b>		Zip Code <b>43082</b>		M   D   Y <b>0   2   24</b>		Amount <b>100.00</b>	
Full Name of Contributor <b>The Charles Ritter Company</b>						Registration Number, if PAC			
Street Address <b>35 West Sixth Street</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>check</b>		
City <b>Mansfield</b>		State <b>O   H</b>		Zip Code <b>44901</b>		M   D   Y <b>0   3   27</b>		Amount <b>250.00</b>	
Full Name of Contributor <b>MAD Scientist &amp; Associates, LLC</b>						Registration Number, if PAC			
Street Address <b>1084 E College Ave</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>check</b>		
City <b>Westerville</b>		State <b>O   H</b>		Zip Code <b>43081</b>		M   D   Y <b>0   3   28</b>		Amount <b>100.00</b>	
Full Name of Contributor <b>Dr. Aloma Gibbs</b>						Registration Number, if PAC			
Street Address <b>3855 McDannald Drive</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>check</b>		
City <b>Gahanna</b>		State <b>O   H</b>		Zip Code <b>43230</b>		M   D   Y <b>0   3   27</b>		Amount <b>80.00</b>	
Full Name of Contributor <b>Deborah E Meissner</b>						Registration Number, if PAC			
Street Address <b>135 E Walnut Street</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>check</b>		
City <b>Westerville</b>		State <b>O   H</b>		Zip Code <b>43081</b>		M   D   Y <b>0   3   27</b>		Amount <b>100.00</b>	
Full Name of Contributor <b>Dr. J. Daniel Good</b>						Registration Number, if PAC			
Street Address <b>551 Riverbend Avenue</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>check</b>		
City <b>Powell</b>		State <b>O   H</b>		Zip Code <b>43065</b>		M   D   Y <b>0   3   23</b>		Amount <b>500.00</b>	
Full Name of Contributor <b>The Greenwell Group, LLC</b>						Registration Number, if PAC			
Street Address <b>7996 Thornbush Drive</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>check</b>		
City <b>Westerville</b>		State <b>O   H</b>		Zip Code <b>43082</b>		M   D   Y <b>0   3   26</b>		Amount <b>100.00</b>	
Full Name of Contributor <b>David J Baker</b>						Registration Number, if PAC			
Street Address <b>556 Eastmoor Blvd</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>check</b>		
City <b>Columbus</b>		State <b>O   H</b>		Zip Code <b>43209</b>		M   D   Y <b>0   3   30</b>		Amount <b>100.00</b>	

\* 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 \$ 1,330.00