

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Cindy Crowe for School Board</b>							
Full Name of Contributor <b>Betsey Denny</b>						Registration Number, if PAC	
Street Address <b>797 Lincrest Dr</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Westerville</b>		State <b>OH</b>	Zip Code <b>43082</b>	M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>Gary &amp; Deb Ubry</b>						Registration Number, if PAC	
Street Address <b>7293 Hawksbeard Dr.</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Westerville</b>		State <b>OH</b>	Zip Code <b>43082</b>	M <b>1</b>	D <b>0</b>	Y <b>0</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>Charles &amp; Vicki Moss</b>						Registration Number, if PAC	
Street Address <b>487 Olde English Ct.</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Westerville</b>		State <b>OH</b>	Zip Code <b>43082</b>	M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>John &amp; Donna Racik</b>						Registration Number, if PAC	
Street Address <b>5849 Torrey Pines Ave.</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Westerville</b>		State <b>OH</b>	Zip Code <b>43082</b>	M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>William &amp; Patti Cogswell</b>						Registration Number, if PAC	
Street Address <b>5623 Wild Pine Dr.</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Westerville</b>		State <b>OH</b>	Zip Code <b>43082</b>	M <b>1</b>	D <b>0</b>	Y <b>4</b>	Amount <b>\$25.00</b>
Full Name of Contributor <b>Richard &amp; Paula Laird</b>						Registration Number, if PAC	
Street Address <b>6954 Wild Rose Lane</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Westerville</b>		State <b>OH</b>	Zip Code <b>43082</b>	M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>\$100.00</b>
Full Name of Contributor						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State	Zip Code	M	D	Y	Amount
		OH					
Full Name of Contributor						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State	Zip Code	M	D	Y	Amount
		OH					

\* 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)]

Page Total **\$375.00**