31-A
R.C. 3517.10

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Our Community Our Schools							
Full Name of Contributor						**Registration Number, if PAC**	
Carinne Erlinger							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
5194 Gaymon Dr.							Credit Card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Hilliard,	OH	43026	10	06	11		50.00
Full Name of Contributor						**Registration Number, if PAC**	
Laura Ferguson							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
6566 Charles Rd.							Credit Card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Westerville,	OH	43082	10	06	11		40.00
Full Name of Contributor						**Registration Number, if PAC**	
Fred Tombaugh							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
1159 Lori Ln.							Credit Card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Westerville,	OH	43081	10	05	11		50.00
Full Name of Contributor						**Registration Number, if PAC**	
Ron Morris							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
401 E. Wilson Bridge Rd.							Credit Card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Worthington,	OH	43085	10	05	11		300.00
Full Name of Contributor						**Registration Number, if PAC**	
Jan Johnson-Davis							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
127 Saint Julien St.							Credit Card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Worthington,	OH	43085	10	05	11		40.00
Full Name of Contributor						**Registration Number, if PAC**	
Anthony Poggiali							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
4789 Normandy Dr.							Credit Card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Galena,	OH	43021	10	05	11		25.00
Full Name of Contributor						**Registration Number, if PAC**	
Jeffrey Bracken							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
345 Barrington Dr.							Credit Card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Westerville,	OH	43082	10	14	11		40.00
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**

* 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 $ 545.00