31-A R.C. 3517.10

FOR PAPER FILING ONLY Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Daphne Moehring for Gahanna School	ol Board		<u> </u>	-			
Full Name of Contributor None			Registra	ation Nu	mber, if P	AC	
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
City	State OH	Zip Code	M	D	Y	Amount	
Full Name of Contributor			Registra	ition Nui	nber, if P	AC	
Street Address	Employer/Occu	upation/Labor Organization*	Organization*			Form (Cash, Check, etc.)	
City	State OH	Zip Code	М	D	Y	Amount	
Full Name of Contributor				Registration Number, if PAC			
Street Address	Employer/Occu	upation/Labor Organization*				Form (Cash, Check, etc.)	
City	State OH	Zip Code	M	D	Y	Amount	
Full Name of Contributor	<u></u>		Registra	tion Nur	nber, if P.	AC	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State OH	Zip Code	М	D	Y	Amount	
Full Name of Contributor	·······		Registra	tion Nur	nber, if P	AC	
Street Address	Employer/Occu	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			
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City	State OH	Zip Code	M	D	Y	Amount	
Full Name of Contributor			Registra	tion Nur	nber, if P	AC	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State OH	Zip Code	М	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)]