

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 Grant Douglass | | | | | | Registration Number, if PAC | | | |
| Street Address 1115 Urlin Avenue | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City Grandview Heights | | State OH | Zip Code 43212 | | M 0 | D 8 | Y 2 | Y 1 | Amount \$1,000.00 |
| Full Name of Contributor Carol Hamilton | | | | | | Registration Number, if PAC | | | |
| Street Address 3941 Frazier Road, East | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City Columbus | | State OH | Zip Code 43207 | | M 0 | D 8 | Y 2 | Y 1 | Amount \$100.00 |
| Full Name of Contributor Naome Allison | | | | | | Registration Number, if PAC | | | |
| Street Address 5270 Conklin Drive | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City Hilliard | | State OH | Zip Code 43026 | | M 0 | D 8 | Y 2 | Y 1 | Amount \$50.00 |
| Full Name of Contributor Susan Weber | | | | | | Registration Number, if PAC | | | |
| Street Address 1982 Zollinger Road | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City Columbus | | State OH | Zip Code 43221 | | M 0 | D 8 | Y 2 | Y 1 | Amount \$25.00 |
| Full Name of Contributor Greta Kearns | | | | | | Registration Number, if PAC | | | |
| Street Address 1241 Lincoln Road | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City Grandview Heights | | State OH | Zip Code 43212 | | M 0 | D 8 | Y 2 | Y 1 | Amount \$100.00 |
| Full Name of Contributor Cheryl Brown | | | | | | Registration Number, if PAC | | | |
| Street Address 877 Mohawk St. | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City Columbus | | State OH | Zip Code 43206 | | M 0 | D 8 | Y 2 | Y 2 | Amount \$25.00 |
| Full Name of Contributor Jamie Lusher | | | | | | Registration Number, if PAC | | | |
| Street Address 2691 Bryton Drive | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City Powell | | State OH | Zip Code 43065 | | M 0 | D 8 | Y 2 | Y 2 | Amount \$100.00 |
| Full Name of Contributor Kenny Chaffin | | | | | | Registration Number, if PAC | | | |
| Street Address 9420 Country Club Road | | | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) Check | | |
| City Piqua | | State OH | Zip Code 45356 | | M 0 | D 8 | Y 2 | Y 2 | Amount \$100.00 |

* 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)]