

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full				Registration Number, if PAC	
Groveport Madison Committee For Better Schools					
Full Name of Contributor Patricia Fletcher		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
Street Address 12176 Woodrow Lane				Check	
City Pickerington	State OH	Zip Code 43147	M 0	D 5	Y 1512
				Amount	3.00
Full Name of Contributor Kathy Hinton		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
Street Address 8370 Bruce Ct				Check	
City Canal Winchester	State OH	Zip Code 43110	M 0	D 5	Y 0512
				Amount	3.00
Full Name of Contributor Aimee Holloway		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
Street Address 448 Crestmoore Dr				Check	
City Groveport	State OH	Zip Code 43125	M 0	D 5	Y 1512
				Amount	15.00
Full Name of Contributor H Scott McKenzie		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
Street Address 1814 Millwood Dr				Check	
City Upper Arlington	State OH	Zip Code 43221	M 0	D 5	Y 1512
				Amount	15.00
Full Name of Contributor Susan Moore		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
Street Address 5075 Cherry Blossom Dr				Check	
City Groveport	State OH	Zip Code 43125	M 0	D 5	Y 1512
				Amount	3.00
Full Name of Contributor Mary Tedrow		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
Street Address 6269 Lithopolis Rd.				Check	
City Groveport	State OH	Zip Code 43125	M 0	D 5	Y 2112
				Amount	250.00
Full Name of Contributor Heidi Day		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
Street Address				Check	
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 5	Y 1512
				Amount	3.00
Full Name of Contributor Groveport Madison Local Education Association		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
Street Address 139 Cleveland Ave.				Check	
City Lancaster	State OH	Zip Code 43130	M 0	D 5	Y 2112
				Amount	500.00

\* 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 appear. [R.C. 3517.10(B)(4)]