

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Moncman for Grove City Council							
Full Name of Contributor Sharon L. & Anthony J. Ciccarella						Registration Number, if PAC	
Street Address 48 Horseshoe Drive			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Altoona		State PA	Zip Code 16601		M 09	D 20	Y 15
						Amount \$250.00	
Full Name of Contributor Karen & George J. Holinga						Registration Number, if PAC	
Street Address 4523 Hirth Hill Road			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Grove City		State OH	Zip Code 43123		M 09	D 15	Y 15
						Amount \$100.00	
Full Name of Contributor Victor Awuor						Registration Number, if PAC	
Street Address 7356 Emerald Tree Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Canal Winchester		State OH	Zip Code 43110		M 09	D 20	Y 15
						Amount \$100.00	
Full Name of Contributor Eric J & Mary Jean Girard						Registration Number, if PAC	
Street Address 4481 Hirth Hill Rd E			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Grove City		State OH	Zip Code 43123		M 09	D 20	Y 15
						Amount \$200.00	
Full Name of Contributor Cynthia A. & David Koch						Registration Number, if PAC	
Street Address 1649 Osage Court			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Grove City		State OH	Zip Code 43123		M 09	D 20	Y 15
						Amount \$100.00	
Full Name of Contributor Janet S. Shailer						Registration Number, if PAC	
Street Address 6259 Rising Sun Drive			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Grove City		State OH	Zip Code 43123		M 09	D 20	Y 15
						Amount \$50.00	
Full Name of Contributor Harold W. & Donna F. Carter						Registration Number, if PAC	
Street Address 1553 Chestnut Loop Circle			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Grove City		State OH	Zip Code 43123		M 09	D 20	Y 15
						Amount \$50.00	
Full Name of Contributor Mark M. Shaw						Registration Number, if PAC	
Street Address 4165 Haughn Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Grove City		State OH	Zip Code 43123		M 09	D 21	Y 15
						Amount \$50.00	

* 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)]