

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Madison for City Council</b>						
Full Name of Contributor <b>Diane D Niermeyer</b>				Registration Number, if PAC		
Street Address <b>252 S Parkview Ave</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City <b>Bexley</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>0</b>	D <b>7</b>	Y <b>1 0 1 1</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>Michael D Bloch</b>				Registration Number, if PAC		
Street Address <b>140 Park Drive</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>0</b>	D <b>7</b>	Y <b>1 0 1 1</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>George N Simpson</b>				Registration Number, if PAC		
Street Address <b>258 S Drexel Ave</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City <b>Bexley</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>0</b>	D <b>7</b>	Y <b>1 0 1 1</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>Dr Ronald Erkis</b>				Registration Number, if PAC		
Street Address <b>50 Ashbourne Rd</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City <b>bexley</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>0</b>	D <b>7</b>	Y <b>1 0 1 1</b>	Amount <b>\$150.00</b>
Full Name of Contributor <b>Herbert Glimcher</b>				Registration Number, if PAC		
Street Address <b>10 n Drexel Ave</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>0</b>	D <b>7</b>	Y <b>1 0 1 1</b>	Amount <b>\$200.00</b>
Full Name of Contributor <b>Robert H jeffrey</b>				Registration Number, if PAC		
Street Address <b>88 East Broad St</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	M <b>0</b>	D <b>7</b>	Y <b>1 0 1 1</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>James C Jacobs</b>				Registration Number, if PAC		
Street Address <b>20290 Fairway Oaks Dr apt 252</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City <b>Boca raton</b>	State <b>FL</b>	Zip Code <b>33434</b>	M <b>0</b>	D <b>7</b>	Y <b>1 0 1 1</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>Robert L Shook</b>				Registration Number, if PAC		
Street Address <b>261 S Columbia</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City <b>Bexley</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>0</b>	D <b>7</b>	Y <b>1 0 1 1</b>	Amount <b>\$50.00</b>

\* 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)]

Page Total **\$850.00**