

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full CHRIS AMOROSE GROOMES FOR DUBLIN												
Full Name of Contributor KEVIN KNEBEL						Registration Number, if PAC						
Street Address 5393 BENNINGTON HILLS DR			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK					
City COLUMBUS		State O H		Zip Code 43220		M 0		D 7		Y 3 0 1 5		Amount 200.00
Full Name of Contributor WOLFGANG LANT						Registration Number, if PAC						
Street Address 6999 BEERY LANE			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK					
City DUBLIN		State O H		Zip Code 43017		M 0		D 7		Y 3 0 1 5		Amount 100.00
Full Name of Contributor CYNTHIA LIMA						Registration Number, if PAC						
Street Address 7779 TILLINGHAST DRIVE			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK					
City DUBLIN		State O H		Zip Code 43017		M 0		D 7		Y 3 0 1 5		Amount 200.00
Full Name of Contributor G. GREGORY MARQUIS						Registration Number, if PAC						
Street Address 7319 ROYCROFT CT			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK					
City DUBLIN		State O H		Zip Code 43017		M 0		D 7		Y 3 0 1 5		Amount 100.00
Full Name of Contributor RICHARD E. MALIR						Registration Number, if PAC						
Street Address 4967 GALWAY DR			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK					
City DUBLIN		State O H		Zip Code 43017		M 0		D 7		Y 3 0 1 5		Amount 100.00
Full Name of Contributor LAUREN S. MENNING						Registration Number, if PAC						
Street Address 6167 ABBOTSSFORD DR			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK					
City DUBLIN		State O H		Zip Code 43017		M 0		D 7		Y 3 0 1 5		Amount 100.00
Full Name of Contributor TERRY D. MOWERY						Registration Number, if PAC						
Street Address 9425 CULROSS CT			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK					
City DUBLIN		State O H		Zip Code 43017		M 0		D 7		Y 3 0 1 5		Amount 200.00
Full Name of Contributor CAROL ANN NEALE						Registration Number, if PAC						
Street Address 8308 TILLINGHAST DR			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK					
City DUBLIN		State O H		Zip Code 43017		M 0		D 7		Y 3 0 1 5		Amount 75.00

* 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)]

Page Total \$ 1,075.00