

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 ALVIN BORROMEO					Registration Number, if PAC		
Street Address 7757 FULMER DR		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 0	D 7	Y 3	Amount 25.00	
Full Name of Contributor GREGORY J. BUTLER					Registration Number, if PAC		
Street Address 5714 HADDINGTON DRIVE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 0	D 7	Y 3	Amount 200.00	
Full Name of Contributor J. ROBERT DARROW					Registration Number, if PAC		
Street Address 6461 GREENSTONE LOOP		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43016	M 0	D 7	Y 3	Amount 250.00	
Full Name of Contributor LAURIE O ELSASS					Registration Number, if PAC		
Street Address 6177 ABBOTSFORD DR		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 0	D 7	Y 3	Amount 75.00	
Full Name of Contributor BRAD GABBARD					Registration Number, if PAC		
Street Address 8999 PORTOFINO PLACE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43016	M 0	D 7	Y 3	Amount 100.00	
Full Name of Contributor RONALD L. GEESE					Registration Number, if PAC		
Street Address 5584 BRAND RD		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 0	D 7	Y 3	Amount 250.00	
Full Name of Contributor J.A. GODSEY					Registration Number, if PAC		
Street Address 240 PERTH DRIVE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 0	D 7	Y 3	Amount 100.00	
Full Name of Contributor THOMAS J. KELLEY					Registration Number, if PAC		
Street Address 8595 MILMICHAEL CT		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 0	D 7	Y 3	Amount 150.00	

* 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 \$ 1,150.00