

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Groveport Madison Committee For Better Schools							
Full Name of Contributor Victoria Vazquez					Registration Number, if PAC		
Street Address 2967 Culver		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State O H	Zip Code 43026	M 0 4	D 0 3	Y 1 3	Amount 30.00	
Full Name of Contributor Marie Wells					Registration Number, if PAC		
Street Address 902 Lands End Circle		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Pickerington	State O H	Zip Code 43147	M 0 4	D 0 3	Y 1 3	Amount 5.00	
Full Name of Contributor Pam Wilson					Registration Number, if PAC		
Street Address 379 Shell Ct E		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Whitehall	State O H	Zip Code 43213	M 0 4	D 0 3	Y 1 3	Amount 25.00	
Full Name of Contributor Margaret Young Riley					Registration Number, if PAC		
Street Address 720 N Starr Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Pickerington	State O H	Zip Code 43147	M 0 4	D 0 3	Y 1 3	Amount 50.00	
Full Name of Contributor Emily Curry					Registration Number, if PAC		
Street Address 10820 Edgewood Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 0 4	D 1 0	Y 1 3	Amount 100.00	
Full Name of Contributor Maria McGraw					Registration Number, if PAC		
Street Address 468 Crestmoore Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Groveport	State O H	Zip Code 43125	M 0 4	D 1 0	Y 1 3	Amount 100.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

* 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)]