31-A
R.C. 3517.10

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					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	
Monique Hamilton						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
8149 Reynoldswood Dr						Check
City	State	Zip Code	M	D	Y	Amount
Reynoldsburg	OH	43068	06	03	13	11.00
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	
Lori Hitsman						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
320 Sheryl Dr						Check
City	State	Zip Code	M	D	Y	Amount
Pickerington	OH	43147	06	03	13	11.00
Full Name of Contributor					Registration Number, if PAC	
Aimee Holloway						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
448 Crestmoore Dr						Check
City	State	Zip Code	M	D	Y	Amount
Groveport	OH	43125	06	03	13	30.00
Full Name of Contributor					Registration Number, if PAC	
Bruce Hoover						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
3065 Royal Dornoch Circle						Check
City	State	Zip Code	M	D	Y	Amount
Delaware	OH	43015	06	03	13	70.00
Full Name of Contributor					Registration Number, if PAC	
Robin Howie						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
5247 Gobel Dr						Check
City	State	Zip Code	M	D	Y	Amount
Groveport	OH	43125	06	03	13	5.00
Full Name of Contributor					Registration Number, if PAC	
Janis Imwalle						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
690 Waybaugh Dr						Check
City	State	Zip Code	M	D	Y	Amount
Gahanna	OH	43230	06	03	13	5.00

* 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 $ 132.00