

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Groveport Madison Committee For Better Schools						
Full Name of Contributor Christy Smith				Registration Number, if PAC		
Street Address 4207 Blue Bonnet Ct		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Westerville	State OH	Zip Code 43081	M 0	D 7	Y 3	Amount \$3.00
Full Name of Contributor Jim Sullivan				Registration Number, if PAC		
Street Address 171 Meadow Ridge Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Powell	State OH	Zip Code 43065	M 0	D 7	Y 3	Amount \$20.00
Full Name of Contributor Corey Sweat				Registration Number, if PAC		
Street Address 3010 Schwartz Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43232	M 0	D 7	Y 3	Amount \$3.00
Full Name of Contributor Aric Thomas				Registration Number, if PAC		
Street Address 1342 Halfhill Way		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43207	M 0	D 7	Y 3	Amount \$11.00
Full Name of Contributor Karen Tolone				Registration Number, if PAC		
Street Address 3722 Kellen N Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Gahanna	State OH	Zip Code 43230	M 0	D 7	Y 3	Amount \$5.00
Full Name of Contributor Ann Underwood				Registration Number, if PAC		
Street Address 3512 Harrowgate Ct		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43220	M 0	D 7	Y 3	Amount \$5.00
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 OH	Zip Code 43147	M 0	D 7	Y 3	Amount \$5.00
Full Name of Contributor Aimee Holloway				Registration Number, if PAC		
Street Address 448 Crestmoore Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Groveport	State OH	Zip Code 43125	M 0	D 8	Y 3	Amount \$30.00

* 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 also appear. [R.C. 3517.10(B)(4)]