31-A
R.C. 3517.10

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# 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 | |
| Arthur J Gallagher & Co. | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 2 Pierce Place | | | | | | | Check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Itasca | I L | 60143 | 0 5 | 2 0 | 1 4 | | 1,000.00 | |
| Full Name of Contributor | | | | | | | Registration Number, if PAC | |
| Joe Bradley | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 171 Montclair Ave | Bradley Payne, LLC | | | | | | Check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Circleville | O H | 43113 | 0 5 | 2 0 | 1 4 | | 500.00 | |
| Full Name of Contributor | | | | | | | Registration Number, if PAC | |
| Carl Stedman - Owner | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 420 Lowery Ct | Stedman Flooring Company | | | | | | Check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Groveport | O H | 43125 | 0 5 | 2 0 | 1 4 | | 250.00 | |
| Full Name of Contributor | | | | | | | Registration Number, if PAC | |
| April Bray | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 416 Serenade Street | | | | | | | Check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Reynoldsburg | O H | 43068 | 0 5 | 2 0 | 1 4 | | 11.00 | |
| Full Name of Contributor | | | | | | | Registration Number, if PAC | |
| Matthew DeCastro | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 3860 Chestnut Ridge Loop | | | | | | | Check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Columbus | O H | 43230 | 0 5 | 2 0 | 1 4 | | 100.00 | |
| Full Name of Contributor | | | | | | | Registration Number, if PAC | |
| Tricia Faulkner | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 10430 Marcy Road | | | | | | | Check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Canal Winchester | O H | 43110 | 0 5 | 2 0 | 1 4 | | 40.00 | |
| Full Name of Contributor | | | | | | | Registration Number, if PAC | |
| Monique Hamilton | | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | | | Form (Cash, Check, etc.) | |
| 13967 Bainwick Drive NW | | | | | | | Check | |
| City | State | Zip Code | M | D | Y | | Amount | |
| Pickerington | O H | 43147 | 0 5 | 2 0 | 1 4 | | 11.00 | |
| 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 | O H | 43015 | 0 5 | 2 0 | 1 4 | | 69.34 | |

* 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 1 total $ 1,981.34