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													
CHRIS AMOROSE GROOMES FOR DUBLIN													
Full Name of Contributor									Registration Number, if PAC				
MONICA G. SMITH													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
8155 GRAFTON END												CHECK	
City	State	Zip Code	M		D		Y					Amount	
DUBLIN	OH	43016	0	9	0	2	1	5				25.00	
Full Name of Contributor									Registration Number, if PAC				
JODI L. RHODES													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
6475 GREENSTONE LOOP												CHECK	
City	State	Zip Code	M		D		Y					Amount	
DUBLIN	OH	43016	0	9	0	2	1	5				100.00	
Full Name of Contributor									Registration Number, if PAC				
KEITH W. TOMLINSON													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
8550 TARTAN FIELDS DR.												CHECK	
City	State	Zip Code	M		D		Y					Amount	
DUBLIN	OH	43017	0	9	0	2	1	5				100.00	
Full Name of Contributor									Registration Number, if PAC				
RONALD B. GARVEY													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
5900 TARTAN CIRCLE S												CHECK	
City	State	Zip Code	M		D		Y					Amount	
DUBLIN	OH	43017	0	9	0	2	1	5				250.00	
Full Name of Contributor									Registration Number, if PAC				
PEIGI HANSON													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
8077 CROSSGATE COURT SOUTH	Original Contribution 250.00 - Fee 7.55											PAYPAL	
City	State	Zip Code	M		D		Y					Amount	
DUBLIN	OH	43017	0	9	0	9	1	5				242.45	
Full Name of Contributor									Registration Number, if PAC				
STANLEY A. MALATESTA													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
4457 MASTERS DRIVE												CHECK	
City	State	Zip Code	M		D		Y					Amount	
UPPER ARLINGTON	OH	43220	0	9	1	0	1	5				250.00	
Full Name of Contributor									Registration Number, if PAC				
KARI B. HERTEL													
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
4607 WUERTZ CT												CHECK	
City	State	Zip Code	M		D		Y					Amount	
DUBLIN	OH	43017	0	9	1	5	1	5				50.00	
Full Name of Contributor									Registration Number, if PAC				
CENTRAL OHIO REALTORS PAC									31-172-1082				
Street Address	Employer/Occupation/Labor Organization*											Form (Cash, Check, etc.)	
2700 AIRPORT DRIVE												CHECK	
City	State	Zip Code	M		D		Y					Amount	
COLUMBUS	OH	43219	0	9	1	8	1	5				250.00	

* 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 $ 1,267.45