## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

V		
Name of Committee in Full	D 01 1	
Groveport Madison Committee Fo	r Better Schools	-
Full Name of Contributor		Registration Number, if PAC
Patricia Fletcher		
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
12176 Woodrow Lane		Check
City	State Zip Code	M D Y Amount
Pickerington	O H 43147	0 9 3 0 1 1 3.00
Full Name of Contributor		Registration Number, if PAC
Kathy Hinton		1
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
8370 Bruce Ct		Check
City	State Zip Code	M D Y Amount
Canal Winchester	O H 43110	0 9 3 0 1 1 3.00
Full Name of Contributor	0 10110	Registration Number, if PAC
Aimee Holloway		
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
	Епрюустоссиранов Евоот отданизация	Check
448 Crestmoore Dr	State Zin Code	
` _	State Zip Code O H 43125	
Groveport	O H 43125	0 9 3 0 1 1 15.00
Full Name of Contributor		Registration Number, if PAC
H Scott McKenzie		
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
1814 Millwood Dr		Check
City	State Zip Code	M D Y Amount
Upper Arlington	O H 43221	0 9 3 0 1 1 15.00
Full Name of Contributor		Registration Number, if PAC
Susan Moore		
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
5075 Cherry Blossom Dr		Check
City	State Zip Code	M D Y Amount
Groveport	O H 43125	0 9 3 0 1 1 3.00
Full Name of Contributor		Registration Number, if PAC
Heidi Day		
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
8467 Kingsley Drive		Check
City	State Zip Code	M D Y Amount
Reynoldsburg	O H 43068	0 9 3 0 1 1 3.00
Full Name of Contributor	10000	Registration Number, if PAC
Groveport Madison Local Education	on Association	1.056.00.00.00.00.00.00.00.00.00.00.00.00.00
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
6993 Britwell	Employer occupation Labor Organization	Check
City	State Zip Code	
1 ·		
Reynoldsburg Full Name of Contributor	O H 43068	0 9 2 8 1 1 200.00
		Registration Number, if PAC
Petermann LTD	Formation of Comments of the C	
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
8041 Hosbrook Road Ste 330		Check
City	State Zip Code	M D Y Amount
Cincinnati	O H 45236	1 0 0 6 1 1 5,000,00

<sup>\*</sup> 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)]