31-A
R.C. 3517.10

FILED

Statement of Contributions Received

2015 OCT -2 PM 2:35

FRANKLIN COUNTY BOARD OF ELECTIONS

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**	
Heidi Day							
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**	
8467 Kingsley Dr						Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**	
Reynoldsburg	O | H	43068	0 | 6	2 | 8	1 | 3	3.00	
Full Name of Contributor						**Registration Number, if PAC**	
Matt 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 | 6	2 | 8	1 | 3	20.00	
Full Name of Contributor						**Registration Number, if PAC**	
Jane Deckard							
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**	
3808 Laguna Dr						Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**	
Columbus	O | H	43232	0 | 6	2 | 8	1 | 3	5.00	
Full Name of Contributor						**Registration Number, if PAC**	
Ashley Dibling							
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**	
441 Shagbark Ct						Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**	
Pickerington	O | H	43147	0 | 6	2 | 8	1 | 3	5.00	
Full Name of Contributor						**Registration Number, if PAC**	
Jennifer Dodson							
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**	
344 W Hubbard St.						Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**	
Columbus	O | H	43215	0 | 6	2 | 8	1 | 3	3.00	
Full Name of Contributor						**Registration Number, if PAC**	
Wendy Estep							
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**	
3526 Braidwood Dr.						Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**	
Hilliard	O | H	43026	0 | 6	2 | 8	1 | 3	5.00	
Full Name of Contributor						**Registration Number, if PAC**	
Doug Ewart							
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**	
235 Kramer St.						Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**	
Canal Winchester	O | H	43110	0 | 6	2 | 8	1 | 3	3.00	
Full Name of Contributor						**Registration Number, if PAC**	
Tricia Faulkner							
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**	
10430 Marcy Rd.						Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**	
Canal Winchester	O | H	43110	0 | 6	2 | 8	1 | 3	11.00	

* 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 $ 55.00