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Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Madison for Bexley City Council			.		
Full Name of Contributor Jeffrey D Meyer			Registration Number, if I	Registration Number, if PAC	
Street Address 195 S Columbia Ave	EmployenOccu	pation/Labor Organization*		Form (Cash, Check, etc.) check	
City Bexley	State OH	Zip Code 43209	0 4 3 0 1 1	Amount \$250.00	
Full Name of Contributor Jeffrey H Walker			Registration Number, if	PAC	
Street Address 368 Northview Drive	Employer/Occupation/Labor Organization* managing Dir US Realty consultants		Form (Cash, Check, etc.) check		
City Bexley	State OH	Zip Code 43209	0 4 1 8 1 1	Amount \$250.00	
'ull Name of Contributor Registration Number, if Martin Adler					
Street Address 6029 Mc naughten Grove Lane	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43213	0 5 0 1 1 1	Amount \$150.00	
Full Name of Contributor Linda Sinoway	···		Registration Number, if	PAC	
Street Address 122 S Ardmore Rd	Employer/Occi	pation/Labor Organization*		Form (Cash, Check, etc.) check	
City Bexley	State OH	Zip Code 43209	0 5 0 2 1 1	Amount \$200.00	
Full Name of Contributor David Pryor			Registration Number, if	_	
Street Address 2341 Bryden rd	Employer/Occu	apation/Labor Organization*		Form (Cash, Check, etc.) check	
City Bexley	State OH	Zip Code 43209	0 5 0 2 1 1	Amount \$200.00	
Full Name of Contributor Beim & Grundstein (Allen Beim) Registration Number, if I				PAC	
Street Address 2776 East MAin St, PO Box 09743	Employer/Occi	pation/Labor Organization		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43209	0 4 1 0 1 1	Amount \$100.00	
Full Name of Contributor Jeffre E Levy			Registration Number, if		
Street Address 100 S Parkview Ave	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Colubmus	State OH	Zip Code 43209	M D Y 1	Amount \$250.00	
Full Name of Contributor Michael W Polster			Registration Number, if		
Street Address 368 S Parkview Ave	Employer/Occu	apation/Labor Organization*		Form (Cash, Check, etc.) check	
City Bexley	State OH	Zip Code 43209	M D Y 1 0 1 1	Amount \$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 also appear. [R.C. 3517.10(B)(4)]