Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								 -
Groveport Madison Committee for Bet	ter Sch	ools						
Full Name of Contributor		0 0 - 0		Registra	tion Num	ber, if PA	С	-
Stephen Pack								
Street Address	Employer/	Оссира	tion/Labor Organization*				Form (Cash, Chec)	k. etc.)
3338 Latonia Court		-	_				Cash	·
City	State	ė	Zip Code	M	D	Y	Amount	
Columbus		Н	43232	013	0 4	1 4		4.55
Full Name of Contributor	, ,				tion Num	ber, if PA	С	
Heather Clingerman								
Street Address	Employer/Occupation/Labor Organization*				Form (Cash. Check. etc.)			
5748 Rarey Avenue F							Cash	
City	Stat	e .	Zip Code	М	D	Y	Amount	
Groveport	Гот	Н	43125	013	0 4	1/4		4.55
Full Name of Contributor					tion Num	ber, if PA	С	
Rita Furniss								
Street Address	Employer/	Оссира	tion/Labor Organization*				Form (Cash, Chec)	k, etc.)
2972 Arrowsmith Drive							Cash	
City	Stat	à	Zip Code	М	D	Y	Amount	
Revnoldsburg	01	Н	43068	1013	0 4	1 4		23.97
Full Name of Contributor				_	tion Num		c	
Tamara Ervin								
Street Address	Employer/	Оссира	tion/Labor Organization*				Form (Cash, Chec	k. etc.)
3532 Arnsby Road					Cash			
City	Stat	2	Zip Code	M	D	Y	Amount	
Columbus	loi	Н	43232	1013	014	1 4		4.55
Full Name of Contributor	<u> </u>				tion Num		C	
Kelly Chapman								
Street Address	Employer/	Оссира	tion/Labor Organization*	-			Form (Cash, Chec)	k, etc.)
7500 Groveport Road							Cash	
City	State	:	Zip Code	M	D	Y	Amount	
Groveport	0 1	Н	43125	013	014	1 4		9.41
Full Name of Contributor	•			Registra	tion Num	er. if PA	C	
Kim Clements								
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check	k. etc.)			
3467 London Lancaster Road							Cash	
City	State		Zip Code	M	D	Y-	Amount	
Groveport	0	Н	43125	013	0 4	1 4		23.97
Full Name of Contributor					tion Num			
Robert Boggs								
Street Address	Employer/	Occupa	tion/Labor Organization*				Form (Cash, Check	k, etc.)
5370 Folsom Drive							Cash	
City	State		Zip Code	M	D	Y	Amount	
Groveport	$\mid \circ \mid$	Н	43125	0 3	014	1 4		4.55
Full Name of Contributor Registration Number, if PAC								
Stevi Cockerham								
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
3744 Revolutionary Drive					Cash			
City	Stati		Zip Code	M	D	Y	Amount	
Columbus		Н	43207	0 3	0 4	$\lfloor 1 \rfloor 4$		4.55

Page Total \$	80.10

^{*} 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)]