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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full	NI IDI INI							
CHRIS AMOROSE GROOMES FOR D	JUBLIN		In .	* X7 1	'CDA			
			Kegistrat	ion Numb	er, ir PA	C		
ROBIN CAMPBELL Street Address	Temples as /Occur	nation/Labor Organization®			1	Form (Cash, Chec)	
	Employen/Occuj	pation/Labor Organization*						
5565 BRAND ROAD		Zip Code	1 1 1		Y	MONEY	JKDEK	
DUBLIN	State O H	43017	$\begin{bmatrix} M \\ 0 \end{bmatrix} 7$	D ole	1 5	Amount	100.00	
Full Name of Contributor	ОІН	4 3017	, 0 , ,	2 8			100.00	
1 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3								
CLARE SCOWDEN Street Address	Employer/Door	pation/Labor Organization*			1	Form (Cash, Check)	
	Employer/Occup				CHECK			
8196 WINCHCOMBE DRIVE	State	Zip Code	M	D	Y	Amount		
DUBLIN	O H	43016	017	2 8		Allocal	100.00	
Full Name of Contributor	10111	1 43010					100.00	
1 · · · · · · · · · · · · · · · · · · ·								
ROBERT BOICH Street Address	TEmployer/Occur	oation/Labor Organization*				Form (Cash, Chec	k etc.)	
	Lanployer/Occup				PAYPAL			
7590 BELLAIRE AVE	State	Zip Code	ТМ	Đ	Y	Amount		
DUBLIN	OH	43017	017	2 8		, unoun	250.00	
Full Name of Contributor	1012	43017		ion Numl		С.	230.00	
CHRISTINA HEINLEN			it gasau		,			
Street Address	Employer/Occur	pation/Labor Organization*			-	Form (Cash, Chec	k, etc.)	
6440 GREENSTONE LOOP		January Dagumanan				PAYPAL		
City	State	Zip Code	М	D	Ý	Amount	,	
DUBLIN	OH	43016		218	1 5		100.00	
Full Name of Contributor		1 10010				c	100.00	
Full Name of Contributor Registration Number, if PAC JAMES GEESE								
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Chec	k, etc.)	
5550 ASHFORD RD		•				CHECK	-	
City	State	Zip Code	М	D	Y	Amount		
DUBLIN	$O \mid H$	43017	017	2 9	115		250.00	
Full Name of Contributor	10,	10017		ion Numl		С		
KATHRYN J. ALLEN								
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)				
5753 HADDINGTON DRIVE						PAYPAL		
City	State	Zip Code	M	D	Y	Amount		
DUBLIN	OIH	43017	017	2 9	1 5	l	250.00	
Full Name of Contributor			Registrat					
SUZANNE WALKER			İ					
Street Address	Employer/Occu	pation/Labor Organization*	- L.			Form (Cash, Chec	k, etc.)	
7623 RIVERSIDE DRIVE					CHECK			
City	State	Zip Code	М	D	Y	Amount		
DUBLIN	O H	43016	0 7	310	1 5		100.00	
Full Name of Contributor	•		Registrat	tion Num	ber, if PA	vC		
DAWN ANDERSON BUTCHER								
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Chec	k, etc.)	
9882 ERIN WOODS DRIVE						CHECK		
City	State	Zip Code	M	D	Y	Amount		
DUBLIN	O H	43017	017	3 0	15		250.00	

Page Total \$ 1,400.00

^{*} 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)]