

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Groveport Madison Committee for Better Schools							
Full Name of Contributor Rebecca Harp					Registration Number, if PAC		
Street Address 3679 Alpena Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Columbus	State O H	Zip Code 43232	M 0 3	D 1 7	Y 1 4	Amount 4.55	
Full Name of Contributor Emily Whiting					Registration Number, if PAC		
Street Address 3019 Hubbardton Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Reynoldsburg	State O H	Zip Code 43068	M 0 3	D 1 7	Y 1 4	Amount 4.55	
Full Name of Contributor Shannon Patel					Registration Number, if PAC		
Street Address 6156 Kensington Glen Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Canal Winchester	State O H	Zip Code 43110	M 0 3	D 1 8	Y 1 4	Amount 4.55	
Full Name of Contributor Jodi Coleman					Registration Number, if PAC		
Street Address 4300 Weaver Parkway		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Warrenville	State I L	Zip Code 60555	M 0 3	D 1 8	Y 1 4	Amount 96.80	
Full Name of Contributor Jeannie Henkel					Registration Number, if PAC		
Street Address 6303 Lithopolis Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Groveport	State O H	Zip Code 43125	M 0 3	D 1 8	Y 1 4	Amount 9.41	
Full Name of Contributor Teresa Hoffman					Registration Number, if PAC		
Street Address 4888 Hayes Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Groveport	State O H	Zip Code 43125	M 0 3	D 2 0	Y 1 4	Amount 23.97	
Full Name of Contributor Tinna DeMatteo					Registration Number, if PAC		
Street Address 5266 Knight Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Groveport	State O H	Zip Code 43125	M 0 3	D 2 4	Y 1 4	Amount 4.55	
Full Name of Contributor Kelly McElravev					Registration Number, if PAC		
Street Address 4054 Walnut Crossing Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Groveport	State O H	Zip Code 43125	M 0 3	D 2 7	Y 1 4	Amount 4.55	

* 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))