

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 Dynamix Engineering					Registration Number, if PAC		
Street Address 855 Grandview Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 0	D 2 0	Y 1 0	Amount 5,000.00	
Full Name of Contributor Larry Ricchi					Registration Number, if PAC		
Street Address 4971 Brewster		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Columbus	State O H	Zip Code 43232	M 1 0	D 2 0	Y 1 0	Amount 100.00	
Full Name of Contributor Jack Wills					Registration Number, if PAC		
Street Address 469 Beaver Creek Dri		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Gahanna	State O H	Zip Code 43230	M 1 0	D 2 0	Y 1 0	Amount 40.00	
Full Name of Contributor Cash					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City	State 	Zip Code	M 1 0	D 2 0	Y 1 0	Amount 151.05	
Full Name of Contributor Scott McKenzie					Registration Number, if PAC		
Street Address 1814 Millwood Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43221	M 1 0	D 2 7	Y 1 0	Amount 500.00	
Full Name of Contributor John Hurd					Registration Number, if PAC		
Street Address 5297 Stephenson St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Nelsonville	State O H	Zip Code 45764	M 1 0	D 2 7	Y 1 0	Amount 85.00	
Full Name of Contributor Linda Miller					Registration Number, if PAC		
Street Address 839 Euclidean Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State O H	Zip Code 43209	M 1 0	D 2 7	Y 1 0	Amount 100.00	
Full Name of Contributor Todd Boggs					Registration Number, if PAC		
Street Address 4628 Pickerington Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Carroll	State O H	Zip Code 43112	M 1 0	D 2 7	Y 1 0	Amount 50.00	

* 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 \$ 6,026.05