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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 City Council							
Full Name of Contributor Patrick E. Giller			Registration Number, if I	AC			
Employer/Occupation/Labor Organization 45 Ashbourne Rd				Form (Cash, Check, etc.) check			
City bexley	State OH	Zip Code 43209	0 9 1 4 1 1	Amount \$250.00			
Full Name of Contributor Registration Number, if PAC							
April Zimmerman Katz eet Address Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
336 S. Columbia Ave				check			
City Bexley	State OH	Zip Code 43209	0 9 1 2 1 1	Amount \$50.00			
Full Name of Contributor Michael J. Agriesti							
Street Address 2607 E. Broad St	1 - 6 - 3			Form (Cash, Check, etc.) check			
City Bexley	State OH	Zip Code 43209	0 9 1 7 1 1	Amount \$200.00			
Full Name of Contributor Carol Lannan Registration Number, if PAC							
reet Address Employer/Occupation/Labor Organization* 832 Vernon Rd				Form (Cash, Check, etc.) check			
City Bexley	State OH	Zip Code 43209	0 9 1 7 1 1	Amount \$25.00			
Full Name of Contributor Julie Heilman Registration Number, if PAC							
Street Address 130 S. Columbia	·····································			Form (Cash, Check, etc.) check			
City bexley	State OH	Zip Code 43209	0 9 1 7 1 1	Amount \$150.00			
Full Name of Contributor Bretton J Leukart Registration Number, if PAC							
Street Address 317 Jackson St.	Employer/Occu	apation/Labor Organization*		Form (Cash, Check, etc.) check			
City Columbus	State OH	Zip Code 43206	M D Y 1 1	Amount \$150.00			
Full Name of Contributor James A. Bowman							
Street Address 107 Ashbourne Rd	Employer/Occi	pation/Labor Organization*		Form (Cash, Check, etc.) check			
City Bexley	Staje OH	Zip Code 43209	0 9 1 7 1 1	Amount \$300.00			
Full Name of Contributor Harlan Meyer, MD			Registration Number, if				
Street Address 105 S. Parkview Rd	Employer/Occupation/Labor Organization* radiologist			Form (Cash, Check, etc.) check			
City Bexley	State OH	Zip Code 43209	0 9 1 7 1 1	Amount \$250.00			

Page Total \$1,375.00

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)]