31-E R.C. 3517.10(B)

Event Date	7/4/12
Page	1

Statement of Contributions Received at a Social or Fundraising Event

<u>,</u>	Prescribed by Sec	Prescribed by Secretary of State 3/05						
Name of Committee in Full			•					
Groveport Madison Commi	ttee For Better Schools	3				<u> </u>		
Full Name of Contributor	•		Registra	tion Nun	nber, if F	PAC		
General Public 4th of July P			M	1 -	1	T.		
Street Address	Employer/Occupa	Employer/Occupation/Labor Organization*		D	Y	Amount	450.00	
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City	State	Zip Code	Form(Ca	ash Chec				
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Street Address	Employer/Occup	Employer/Occupation/Labor Organization*		D	Y	Amount		
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City	State	Zip Code	Form(C	ash,Chec	k etc)			
City	, state	Zip Code	1 0.1(0.		к,осо)			
Full Name of Contributor	l l		Registra	ition Nun	nber. if I	PAC		
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Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount		
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City	State	Zip Code	Form(C	ash,Chec	k,etc)			
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Street Address	Employer/Occup	Employer/Occupation/Labor Organization*		M D Y Amount				
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Full Name of Contributor			Registra	ation Nur	nber, if	?AC		
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Street Address	Employer/Occup	Employer/Occupation/Labor Organization*		D	Y	Amount		
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City	State	Zip Code	Form(C	ash,Cheo	ek,ete)			

Fill in the boxes below only on the last page for this event,

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event	Total expenditures this event	
		Page Total \$ 479.22
479.22		<u> </u>
477.22		L

[•] 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)]