

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for a Safer Madison Township							
Full Name of Contributor Robert Bates					Registration Number, if PAC		
Street Address 6710 Bigerton Bend		Employer/Occupation/Labor Organization* Fire Chief			Form (Cash, Check, etc.) Check		
City Canal Winchester	State OH	Zip Code 43110	M 0	D 2	Y 2	Amount \$400.00	
Full Name of Contributor Allen Young					Registration Number, if PAC		
Street Address 7580 Atwell Ct.		Employer/Occupation/Labor Organization* Firefighter			Form (Cash, Check, etc.) Check		
City Canal Winchester	State OH	Zip Code 43110	M 0	D 2	Y 2	Amount \$50.00	
Full Name of Contributor Jones Truck & Spring Repair Inc.					Registration Number, if PAC		
Street Address 350 Frank Rd.		Employer/Occupation/Labor Organization* Jones Truck & Spring Repair Inc.			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43207	M 0	D 3	Y 1	Amount \$100.00	
Full Name of Contributor Rusty's Towing Service, Inc					Registration Number, if PAC		
Street Address 4845 Obetz-Reese Rd.		Employer/Occupation/Labor Organization* Rusty's Towing Service Inc			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43207	M 0	D 3	Y 1	Amount \$300.00	
Full Name of Contributor George & Cynthia Thomas					Registration Number, if PAC		
Street Address 7731 Hayden Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State OH	Zip Code 43026	M 0	D 3	Y 1	Amount \$200.00	
Full Name of Contributor William Mallory					Registration Number, if PAC		
Street Address 2523 W. Fair Ave.		Employer/Occupation/Labor Organization* Firefighter			Form (Cash, Check, etc.) Check		
City Lancaster	State OH	Zip Code 43130	M 0	D 3	Y 1	Amount \$50.00	
Full Name of Contributor Rashid Taylor					Registration Number, if PAC		
Street Address 596 Ceresia Ct.		Employer/Occupation/Labor Organization* Firefighter			Form (Cash, Check, etc.) Check		
City Pickerington	State OH	Zip Code 43147	M 0	D 3	Y 1	Amount \$50.00	
Full Name of Contributor Howard Hahn					Registration Number, if PAC		
Street Address 1279 Rohr Rd.		Employer/Occupation/Labor Organization* Firefighter			Form (Cash, Check, etc.) Check		
City Lockbourne	State OH	Zip Code 43137	M 0	D 3	Y 1	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 also appear. [R.C. 3517.10(B)(4)]