

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 Janis Imwalle					Registration Number, if PAC		
Street Address 690 Waybaugh Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 0 6	D 2 8	Y 1 3	Amount 5.00	
Full Name of Contributor Amy Jones					Registration Number, if PAC		
Street Address 8455 Amarillo Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Blacklick	State O H	Zip Code 43004	M 0 6	D 2 8	Y 1 3	Amount 11.00	
Full Name of Contributor Deborah Lefever					Registration Number, if PAC		
Street Address 116 Bellefield Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 0 6	D 2 8	Y 1 3	Amount 5.00	
Full Name of Contributor Veronica Leport					Registration Number, if PAC		
Street Address 3418 London Lancaster Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Groveport	State O H	Zip Code 43125	M 0 6	D 2 8	Y 1 3	Amount 5.00	
Full Name of Contributor Lindsey Malacos					Registration Number, if PAC		
Street Address 1068 1/2 Mt. Pleasant Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43201	M 0 6	D 2 8	Y 1 3	Amount 3.00	
Full Name of Contributor Amie Marburger					Registration Number, if PAC		
Street Address 170 Green Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Groveport	State O H	Zip Code 43125	M 0 6	D 2 8	Y 1 3	Amount 5.00	
Full Name of Contributor Susan Moore					Registration Number, if PAC		
Street Address 5075 Cherry Blossom Dr		Employer/Occupation/Labor Organization* Groveport Madison LSD/Superintendent			Form (Cash, Check, etc.) Check		
City Groveport	State O H	Zip Code 43125	M 0 6	D 2 8	Y 1 3	Amount 6.00	
Full Name of Contributor Andrea Murphy					Registration Number, if PAC		
Street Address 145 E Waterloo St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Canal Winchester	State O H	Zip Code 43110	M 0 6	D 2 8	Y 1 3	Amount 7.00	

* 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)]