

Statement of Contributions Received

Prescribed by Secretary of State 305

Name of Committee in Full CHRIS AMOROSE GROOMES FOR DUBLIN							
Full Name of Contributor THE ISAAC WILES POLITICAL ACTION COMMITTEE					Registration Number, if PAC CP-1058		
Street Address 2 MIRANOVA PLACE, SUITE 700		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43215	M 1	D 0	Y 0	Amount 250.00	
Full Name of Contributor JEFFREY SMITH					Registration Number, if PAC		
Street Address 7226 SPRINGVIEW LANE		Employer/Occupation/Labor Organization* Original Contribution 150.00 - Fee 4.65			Form (Cash, Check, etc.) PAYPAL		
City DUBLIN	State O H	Zip Code 43016	M 1	D 0	Y 6	Amount 145.35	
Full Name of Contributor PETER J. MONAGHAN					Registration Number, if PAC		
Street Address 6959 PILAR COURT		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 1	D 0	Y 6	Amount 50.00	
Full Name of Contributor JEROLD H. HAINES					Registration Number, if PAC		
Street Address 5849 LEVIN LINKS CT		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City DUBLIN	State O H	Zip Code 43017	M 1	D 0	Y 1	Amount 50.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

* 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)]