

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 Rickey Clark					Registration Number, if PAC		
Street Address 4997 Birch Grove Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Groveport	State O H	Zip Code 43125	M 0	D 4	Y 0	Amount 5.00	
Full Name of Contributor Deanna Clinger					Registration Number, if PAC		
Street Address 5133 Phillips Run		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Canal Winchester	State O H	Zip Code 43110	M 0	D 4	Y 0	Amount 20.00	
Full Name of Contributor Dorethia Copas					Registration Number, if PAC		
Street Address 128 Leasure Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Pickerington	State O H	Zip Code 43147	M 0	D 4	Y 0	Amount 20.00	
Full Name of Contributor Heidi Dav					Registration Number, if PAC		
Street Address 8467 Kingslev Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Revnoldsburg	State O H	Zip Code 43068	M 0	D 4	Y 0	Amount 18.00	
Full Name of Contributor Matt Decastro					Registration Number, if PAC		
Street Address 3860 Chestnut Ridge Loop		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43230	M 0	D 4	Y 0	Amount 20.00	
Full Name of Contributor Jane Deckard					Registration Number, if PAC		
Street Address 3808 Laguna Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43232	M 0	D 4	Y 0	Amount 5.00	
Full Name of Contributor Ashley Dibling					Registration Number, if PAC		
Street Address 441 Shagbark Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Pickerington	State O H	Zip Code 43147	M 0	D 4	Y 0	Amount 5.00	
Full Name of Contributor Abbi Eft					Registration Number, if PAC		
Street Address 3010 Schwartz Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43232	M 0	D 4	Y 0	Amount 25.00	

* 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)]