

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 Heidi Day					Registration Number, if PAC		
Street Address 8467 Kingsley Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Reynoldsburg	State O H	Zip Code 43068	M 0	D 6	Y 2	Amount 3.00	
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 6	Y 2	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 6	Y 2	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 6	Y 2	Amount 5.00	
Full Name of Contributor Jennifer Dodson					Registration Number, if PAC		
Street Address 344 W Hubbard St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0	D 6	Y 2	Amount 3.00	
Full Name of Contributor Wendy Estep					Registration Number, if PAC		
Street Address 3526 Braidwood Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State O H	Zip Code 43026	M 0	D 6	Y 2	Amount 5.00	
Full Name of Contributor Doug Ewart					Registration Number, if PAC		
Street Address 235 Kramer St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Canal Winchester	State O H	Zip Code 43110	M 0	D 6	Y 2	Amount 3.00	
Full Name of Contributor Tricia Faulkner					Registration Number, if PAC		
Street Address 10430 Marcy Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City Canal Winchester	State O H	Zip Code 43110	M 0	D 6	Y 2	Amount 11.00	

* 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)]