

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizen for a Safer Madison Township										
Full Name of Contributor Michael Bondra							Registration Number, if PAC			
Street Address 7369 Eel Ct				Employer/Occupation/Labor Organization* Fire Fighter			Form (Cash, Check, etc.) Check			
City Columbus		State OH	Zip Code 43235		M 0	D 4	Y 0	Y 2	Y 1	Y 5
Amount \$50.00										
Full Name of Contributor Edward Dildine							Registration Number, if PAC			
Street Address 182 Green Ave				Employer/Occupation/Labor Organization* Fire Fighter			Form (Cash, Check, etc.) Chcek			
City Groveport		State OH	Zip Code 43125		M 0	D 4	Y 0	Y 2	Y 1	Y 5
Amount \$50.00										
Full Name of Contributor Brendan Smitherman							Registration Number, if PAC			
Street Address 6576 Braddock Pl.				Employer/Occupation/Labor Organization* Fire Fighter			Form (Cash, Check, etc.) Chcek			
City Canal Winchester		State OH	Zip Code 43110		M 0	D 4	Y 0	Y 2	Y 1	Y 5
Amount \$50.00										
Full Name of Contributor Wayne Altman							Registration Number, if PAC			
Street Address 12470 Liberty Chapel Rd				Employer/Occupation/Labor Organization* Fire Fighter			Form (Cash, Check, etc.) Check			
City Mount Vernon		State OH	Zip Code 43050		M 0	D 4	Y 0	Y 2	Y 1	Y 5
Amount \$100.00										
Full Name of Contributor James Embree							Registration Number, if PAC			
Street Address 881 Rushcreek Rd.				Employer/Occupation/Labor Organization* Fire Fighter			Form (Cash, Check, etc.) Cash			
City Galloway		State OH	Zip Code 43119		M 0	D 4	Y 0	Y 2	Y 1	Y 5
Amount \$100.00										
Full Name of Contributor Jason Loucks							Registration Number, if PAC			
Street Address 33014 Evening Dr.				Employer/Occupation/Labor Organization* Fire Fighter			Form (Cash, Check, etc.) Cash			
City Logan		State OH	Zip Code 43138		M 0	D 4	Y 0	Y 2	Y 1	Y 5
Amount \$50.00										
Full Name of Contributor David Janning							Registration Number, if PAC			
Street Address 318 Charmel Pl.				Employer/Occupation/Labor Organization* Fire ightler			Form (Cash, Check, etc.) Cash			
City Columbus		State OH	Zip Code 43235		M 0	D 4	Y 0	Y 2	Y 1	Y 5
Amount \$50.00										
Full Name of Contributor Christopher Schaffer							Registration Number, if PAC			
Street Address 429 Sturbridge Rd.				Employer/Occupation/Labor Organization* Fire Fighter			Form (Cash, Check, etc.) Cash			
City Columbus		State OH	Zip Code 43228		M 0	D 4	Y 0	Y 8	Y 1	Y 5
Amount \$60.00										

* 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)]