

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 Life Touch National School Studios						Registration Number, if PAC			
Street Address 11000 Viking Dr.				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Eden Prairie		State M N		Zip Code 55344		M 0		D 5	
						Y 0		Amount 400.00	
Full Name of Contributor T Shirts						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check/Cash	
City		State		Zip Code		M 0		D 5	
						Y 0		Amount 299.95	
Full Name of Contributor Pizza Dinner						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check/Cash	
City		State		Zip Code		M 0		D 5	
						Y 0		Amount 793.00	
Full Name of Contributor T Shirts						Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Cash	
City		State		Zip Code		M 0		D 6	
						Y 0		Amount 28.00	
Full Name of Contributor Huntington National Bank						Registration Number, if PAC			
Street Address PO Box 1558				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus		State O H		Zip Code 43219		M 0		D 6	
						Y 0		Amount 500.00	
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	

* 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)]

Page Total \$ 2,020.95