31-A	
R.C. 3517.10	

## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full Madison for Bexley City Council						
Full Name of Contributor Sandy Lehmann			Registration Number, if	PAC		
Street Address 1631 King Ave.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43212	0 7 1 4 1 1	Amount \$50.00		
Full Name of Contributor  Steven R. Keller  Registration Number, if PAC						
Street Address 2607 Sherwood Rd	Employer/Occu	pation/Labor Organization*	<u> </u>	Form (Cash, Check, etc.) check		
City Bexley	State OH	Zip Code 43209	0 7 1 4 1 1	Amount \$100.00		
Full Name of Contributor  Jane D Nipps  Registration Number, if PAC						
Street Address 124 S Knox st	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) check		
City Westerville	State OH	Zip Code 43081	$\begin{bmatrix} 0 & 7 & 1 & 4 & 1 \end{bmatrix}$	Amount \$50.00		
Full Name of Contributor  Geoffrey Stern						
Street Address 65 E State St ste 1800	Employer/Occu	pation/Labor Organization*	<u></u>	Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43215	0 7 1 4 1 1	Amount \$50.00		
Full Name of Contributor  Registration Number, if PAC  Robert J. (Skip) Weiler						
Street Address 41 S High St ste.1010	Employer/Occu	pation/Lubor Organization*		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43215	0 7 1 4 1 1	Amount \$150.00		
Full Name of Contributor Registration Number, if PAC  Margaret Koons						
Street Address 683 Vernon Rd.	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) check		
City Bexley	State OH	Zip Code 43209	0 7 1 4 1 1	Amount \$75.00		
Full Name of Contributor Patrick Grabill			Registration Number, if	PAC		
Street Address 2970 Arbuckle Rd NW	Employer/Occu	upation/Labor Organization*	<u> </u>	Form (Cash, Check, etc.) check		
City London	State OH	Zip Code 43140	0 7 1 4 1 1	Amount \$100.00		
Full Name of Contributor Reg G Martin			Registration Number, if	PAC		
Street Address PO Box 351	Employer/Occu	upation/Labor Organization*		Form (Cash, Check, etc.) check		
City Westerville	State OH	Zip Code 43086	M D Y 1 4 1 1	Amount \$50.00		

Page Total \$625.00

<sup>\*</sup> 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)]