

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for a Safer Madison Township							
Full Name of Contributor Scott Hite					Registration Number, if PAC		
Street Address 1242 Bickel Church Rd.		Employer/Occupation/Labor Organization* Firefighter			Form (Cash, Check, etc.) Cash		
City Baltimore	State OH	Zip Code 43105	M 0	D 3	Y 1	Amount \$50.00	
Full Name of Contributor Crabbe, Brown & James					Registration Number, if PAC		
Street Address 500 S. Front St., Suite 1200		Employer/Occupation/Labor Organization* Legal Firm			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 0	D 4	Y 0	Amount \$500.00	
Full Name of Contributor Skinner Diesel Service					Registration Number, if PAC		
Street Address 2440 Lockbourne Rd.		Employer/Occupation/Labor Organization* Truck Service			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43207	M 0	D 4	Y 0	Amount \$100.00	
Full Name of Contributor Ohio Association of Professional Fire Fighters					Registration Number, if PAC		
Street Address 140 E. Town St., Suite 1225		Employer/Occupation/Labor Organization* Labor Organization			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 0	D 4	Y 0	Amount \$1,500.00	
Full Name of Contributor Drew Gable					Registration Number, if PAC		
Street Address 1710 Messner Dr.		Employer/Occupation/Labor Organization* Fire Fighter			Form (Cash, Check, etc.) Check		
City Hilliard	State OH	Zip Code 43026	M 0	D 4	Y 0	Amount \$50.00	
Full Name of Contributor James Looney					Registration Number, if PAC		
Street Address 3255 Cedar Hill Rd.		Employer/Occupation/Labor Organization* Fire Fighter			Form (Cash, Check, etc.) Check		
City Amanda	State OH	Zip Code 43102	M 0	D 4	Y 0	Amount \$50.00	
Full Name of Contributor Jason Osborne					Registration Number, if PAC		
Street Address 6388 Dietz Dr.		Employer/Occupation/Labor Organization* Fire Fighter			Form (Cash, Check, etc.) Check		
City Canal Winchester	State OH	Zip Code 43110	M 0	D 4	Y 0	Amount \$50.00	
Full Name of Contributor Mark Kempton					Registration Number, if PAC		
Street Address 1738 Kaiser Dr.		Employer/Occupation/Labor Organization* Fire Fighter			Form (Cash, Check, etc.) Check		
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 4	Y 0	Amount \$50.00	

* 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)]

Page Total **\$2,350.00**