31-A
R.C. 3517.10

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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						Registration Number, if PAC	
Michelle Kern							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
207 Harbinger Drive							Cash
City	State	Zip Code	M	D	Y		Amount
Groveport	O | H	43125	0 3	1 3	1 4		4.55
Full Name of Contributor						Registration Number, if PAC	
Zachary Durant							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
3245 Bixwood Court South							Cash
City	State	Zip Code	M	D	Y		Amount
Groveport	O | H	43125	0 3	1 3	1 4		4.55
Full Name of Contributor						Registration Number, if PAC	
Lisa Dickerson							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
220 Harbinger Drive							Cash
City	State	Zip Code	M	D	Y		Amount
Groveport	O | H	43125	0 3	1 4	1 4		23.97
Full Name of Contributor						Registration Number, if PAC	
LaDonna Waller							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
5032 Gunston Drive							
City	State	Zip Code	M	D	Y		Amount
Columbus	O | H	43232	0 3	1 5	1 4		4.55
Full Name of Contributor						Registration Number, if PAC	
Tewana Smiley							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
3617 Alpena Road							Cash
City	State	Zip Code	M	D	Y		Amount
Columbus	O | H	43232	0 3	1 5	1 4		4.55
Full Name of Contributor						Registration Number, if PAC	
Amanda Armstrong							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
3515 Wymore Place							Cash
City	State	Zip Code	M	D	Y		Amount
Columbus	O | H	43232	0 3	1 5	1 4		2.61
Full Name of Contributor						Registration Number, if PAC	
Carl DeMatteo							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
6572 Centennial Drive							Cash
City	State	Zip Code	M	D	Y		Amount
Reynoldsburg	O | H	43068	0 3	1 6	1 4		19.12
Full Name of Contributor						Registration Number, if PAC	
Mike Kimbler							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
2140 E Livingston Ave							Cash
City	State	Zip Code	M	D	Y		Amount
Bexley	O | H	43209	0 3	1 6	1 4		9.41

* 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 $ 73.31