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Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Groveport Madison Committee	For Better Schools					
Full Name of Contributor Molly Naish	Registration Number, if PAC					
Street Address 842 Menarda Pl	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) check		
City Reynoldsburg	State OH	Zip Code 43068	M P Y 3 0 1 3	Amount \$5.00		
Full Name of Contributor Amy Novar						
Street Address 8617 Robbins Loop Dr	Employer/Occu	Employer/Occupation/Labor Organization				
City Reynoldsburg	State OH	Zip Code 43068	0 7 3 0 1 3	Amount \$5.00		
Full Name of Contributor Registration Number, if PA Rebecca Pharo						
Street Address 893 Harbinger Cir E	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) check		
City Groveport	State OH	Zip Code 43125	0 7 3 0 1 3	Amount S5.00		
Full Name of Contributor Registration Number, if PAC Rebecca Prorok						
Street Address 376 E Stanton Ave	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43214	M D Y ₁	Amount \$5.00		
Full Name of Contributor Registration Number, if PAC Catherine Rankin						
Street Address 2221 Ridgeview Rd	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) check		
City Columbus	State OH.	Zip Code 43221	$\begin{bmatrix} 0 & 7 & 3 & 0 & 1 & 3 \end{bmatrix}$	Amount \$3.00		
Full Name of Contributor Registration Number, if P						
Street Address 4871 Brewster Dr	Employer/Occu	Employer/Occupation/Labor Organization				
City Columbus	State OH	Zip Code 43232	M D Y 0 7 3 0 1 3	1		
Full Name of Contributor Lauren Rotman Registration Number, if P.						
Street Address 92 Green Lane	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) check		
City Pickerington	State OH	Zip Code 43147	M D Y V O 7 3 0 1 3	Amount \$5.00		
Full Name of Contributor Deborah Silverman			Registration Number, if F	AC		
Street Address 13858 Wayside Dr	Employer/Occe	pation/Labor Organization		Form (Cash, Check, etc.) check		
City Pickerington	State OH	Zip Code 43147	M D Y 3 0 1 3	Amount \$5.00		

Page Total \$53.00

^{*} 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)]