

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>CHRIS AMOROSE GROOMES FOR DUBLIN</b>							
Full Name of Contributor <b>JAY B. EGGSPUEHLER</b>					Registration Number, if PAC		
Street Address <b>7250 COFFMAN RD</b>		Employer/Occupation/Labor Organization* <b>LAWYER</b>			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DUBLIN</b>	State <b>O   H</b>	Zip Code <b>43017</b>	M <b>0   6</b>	D <b>1   6</b>	Y <b>1   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>CRAIG BARNUM</b>					Registration Number, if PAC		
Street Address <b>35 N HIGH ST</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>DUBLIN</b>	State <b>O   H</b>	Zip Code <b>43017</b>	M <b>0   6</b>	D <b>1   6</b>	Y <b>1   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>TERRI CORATOLA [*\$100 Returned/ See Expenditures]</b>					Registration Number, if PAC		
Street Address <b>8330 STRASBOURG CT</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>DUBLIN</b>	State <b>O   H</b>	Zip Code <b>43017</b>	M <b>0   6</b>	D <b>1   6</b>	Y <b>1   5</b>	Amount <b>200.00</b>	
Full Name of Contributor <b>BRETT VAN BOURGONDIE</b>					Registration Number, if PAC		
Street Address <b>6585 WESTON CIRCLE EAST</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DUBLIN</b>	State <b>O   H</b>	Zip Code <b>43016</b>	M <b>0   7</b>	D <b>0   4</b>	Y <b>1   5</b>	Amount <b>250.00</b>	
Full Name of Contributor <b>PETER CORATOLA</b>					Registration Number, if PAC		
Street Address <b>37 W. BRIDGE STREET, STE 105</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DUBLIN</b>	State <b>O   H</b>	Zip Code <b>43017</b>	M <b>0   7</b>	D <b>2   0</b>	Y <b>1   5</b>	Amount <b>250.00</b>	
Full Name of Contributor <b>MICHAEL MORAN</b>					Registration Number, if PAC		
Street Address <b>7056 SHADY NELMS DR</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DUBLIN</b>	State <b>O   H</b>	Zip Code <b>43017</b>	M <b>0   7</b>	D <b>2   1</b>	Y <b>1   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>WILLIAM BROWNAS</b>					Registration Number, if PAC		
Street Address <b>7365 BELLAIRE AVE</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DUBLIN</b>	State <b>O   H</b>	Zip Code <b>43017</b>	M <b>0   7</b>	D <b>2   7</b>	Y <b>1   5</b>	Amount <b>200.00</b>	
Full Name of Contributor <b>CRAIG ZIMMERS</b>					Registration Number, if PAC		
Street Address <b>8864 NAIRN CT</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DUBLIN</b>	State <b>O   H</b>	Zip Code <b>43017</b>	M <b>0   7</b>	D <b>2   7</b>	Y <b>1   5</b>	Amount <b>250.00</b>	

\* 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 \$ 1,450.00