

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 Christy Smith					Registration Number, if PAC		
Street Address 4207 Blue Bonnet Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43081	M 0 6	D 0 3	Y 1 3	Amount 3.00	
Full Name of Contributor Jim Sullivan					Registration Number, if PAC		
Street Address 171 Meadow Ridge Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Powell	State O H	Zip Code 43065	M 0 6	D 0 3	Y 1 3	Amount 20.00	
Full Name of Contributor Corey Sweat					Registration Number, if PAC		
Street Address 3010 Schwartz Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43232	M 0 6	D 0 3	Y 1 3	Amount 3.00	
Full Name of Contributor Aric Thomas					Registration Number, if PAC		
Street Address 1342 Halfhill Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43207	M 0 6	D 0 3	Y 1 3	Amount 11.00	
Full Name of Contributor Karen Tolone					Registration Number, if PAC		
Street Address 3722 Kellen N Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 0 6	D 0 3	Y 1 3	Amount 5.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor Ann Underwood					Registration Number, if PAC		
Street Address 3512 Harrowgate Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 0 6	D 0 3	Y 1 3	Amount 5.00	
Full Name of Contributor Marie Wells					Registration Number, if PAC		
Street Address 902 Lands End Circle		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Pickerington	State O H	Zip Code 43147	M 0 6	D 0 3	Y 1 3	Amount 5.00	

* 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 appear. [R.C. 3517.10(B)(4)]