

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Leach for UA Council							
Full Name of Contributor Linda J. Mauger					Registration Number, if PAC		
Street Address 2043 N. Devon Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43212	M 0 6	D 1 5	Y 1 1	Amount 100.00	
Full Name of Contributor John B. Patton					Registration Number, if PAC		
Street Address 4766 Riverside Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 0 6	D 0 8	Y 1 1	Amount 250.00	
Full Name of Contributor Jodi L. Patton					Registration Number, if PAC		
Street Address 4766 Riverside Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 0 6	D 0 8	Y 1 1	Amount 250.00	
Full Name of Contributor Ann L. Royer					Registration Number, if PAC		
Street Address 2007 Collingwood Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 6	D 1 8	Y 1 1	Amount 50.00	
Full Name of Contributor Robert W. Sauter					Registration Number, if PAC		
Street Address 1135 Regency Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 0 6	D 2 0	Y 1 1	Amount 25.00	
Full Name of Contributor Mark K. Milligan					Registration Number, if PAC		
Street Address 1275 Fountaine Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) PayPal		
City Columbus	State O H	Zip Code 43221	M 0 6	D 1 1	Y 1 1	Amount 250.00	
Full Name of Contributor Donald Riber					Registration Number, if PAC		
Street Address 2669 Berwyn Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) PayPal		
City Columbus	State O H	Zip Code 43221	M 0 6	D 1 6	Y 1 1	Amount 40.00	
Full Name of Contributor George H. Vincent					Registration Number, if PAC		
Street Address 8150 Varner Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Cincinnati	State O H	Zip Code 45243	M 0 6	D 2 7	Y 1 1	Amount 100.00	

* 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)]

Page Total \$ **1,065.00**