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							
UA Library Levy Campaign							
Full Name of Contributor						Registration Number, if PAC	
Eileen Dobias							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
2260 Buckley Rd.						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43221	0|3	2|7	0|9	25.00	
Full Name of Contributor						Registration Number, if PAC	
Walter Ersing							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
2230 Swansea Rd.						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43221	0|3	2|7	0|9	20.00	
Full Name of Contributor						Registration Number, if PAC	
Marion Folkerth							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
2027 Andover Rd.						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43212	0|3	2|7	0|9	50.00	
Full Name of Contributor						Registration Number, if PAC	
Patricia Furney							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
2729 Zollinger Rd.						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43221	0|3	2|7	0|9	25.00	
Full Name of Contributor						Registration Number, if PAC	
Steven Glass							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
1817 Inchcliff Rd.						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43221	0|3	2|7	0|9	30.00	
Full Name of Contributor						Registration Number, if PAC	
Mary Ann Guillory							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
3836 Patricia Dr.						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43220	0|3	2|7	0|9	20.00	
Full Name of Contributor						Registration Number, if PAC	
Jo Ann Hall							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
3880 Woodbridge Rd.						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43220	0|3	2|7	0|9	25.00	
Full Name of Contributor						Registration Number, if PAC	
Richard Harned							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
2723 Brandon Rd.						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43221	0|3	2|7	0|9	20.00	

* 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 $ 215.00