

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Leach for UA Council							
Full Name of Contributor Marian Braaten					Registration Number, if PAC		
Street Address 1889 Bradywine Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 0 8	D 1 0	Y 1 1	Amount 100.00	
Full Name of Contributor Margaret F. Davis					Registration Number, if PAC		
Street Address 959 Village Brook Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43235	M 0 8	D 0 2	Y 1 1	Amount 100.00	
Full Name of Contributor Barbara McAdam Muller					Registration Number, if PAC		
Street Address 4171 Clairmont Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 0 8	D 0 6	Y 1 1	Amount 100.00	
Full Name of Contributor Gladman for Grandview Steven Gladman Treasurer					Registration Number, if PAC		
Street Address 961 Grandview Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43212	M 0 8	D 0 8	Y 1 1	Amount 50.00	
Full Name of Contributor William J. Graves					Registration Number, if PAC		
Street Address 2405 Northwest Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 8	D 0 8	Y 1 1	Amount 100.00	
Full Name of Contributor Greg J. Davies					Registration Number, if PAC		
Street Address 2646 Brandon Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 0	D 9 	Y 1 1	Amount 250.00	
Full Name of Contributor Michael Dyas					Registration Number, if PAC		
Street Address 2622 Coventry Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) PayPal		
City Columbus	State O H	Zip Code 43221	M 0 8	D 2 1	Y 1 1	Amount 75.00	
Full Name of Contributor Catherine R. Wheaton					Registration Number, if PAC		
Street Address 4544 Benderton Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43220	M 0 8	D 1 5	Y 1 1	Amount 25.00	

* 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 \$ **800.00**