

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full UA Library Levy Campaign							
Full Name of Contributor Charlotte Smith						Registration Number, if PAC	
Street Address 1802 Riverside Dr. Apt. 1130			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43212	M 0 3	D 2 7	Y 0 9	Amount 25.00	
Full Name of Contributor Jeff Stevenson						Registration Number, if PAC	
Street Address 1817 Lynnhaven Dr.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 10.00	
Full Name of Contributor Dr. Ernest Svensson						Registration Number, if PAC	
Street Address 4533 Kipling Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43220	M 0 3	D 2 7	Y 0 9	Amount 25.00	
Full Name of Contributor H. Lewis Ullman						Registration Number, if PAC	
Street Address 1536 College Hill Dr.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 10.00	
Full Name of Contributor Nathan Hanson						Registration Number, if PAC	
Street Address 3477 Sciotangy Dr.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 3	D 3 0	Y 0 9	Amount 25.00	
Full Name of Contributor Jane Ellis						Registration Number, if PAC	
Street Address 2291 Walhaven Ct.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington	State O H	Zip Code 43220	M 0 3	D 3 1	Y 0 9	Amount 50.00	
Full Name of Contributor Sarah Magill						Registration Number, if PAC	
Street Address 2756 Andover Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 3	D 3 1	Y 0 9	Amount 50.00	
Full Name of Contributor Estelle Scott						Registration Number, if PAC	
Street Address 1553 Fishinger Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 3	D 3 1	Y 0 9	Amount 25.00	

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 \$ 220.00