31-A
R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Leach for UA Council							
Full Name of Contributor						Registration Number, if PAC	
Dinsmore and Shohl, LLP Political Action Committee						OH 868	
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
1900 Chemed Center						Check	
City	State	Zip Code	M	D	Y	Amount	
Cincinnati	O | H	45202	0 6	2 4	1 1	250.00	
Full Name of Contributor						Registration Number, if PAC	
Kathryn B. Freiburger							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
2435 Lane Woods Drive						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43221	0 6	2 1	1 1	250.00	
Full Name of Contributor						Registration Number, if PAC	
Charles F. Freiburger							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
2435 Lane Woods Drive						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43221	0 6	2 1	1 1	250.00	
Full Name of Contributor						Registration Number, if PAC	
Joseph M. Berwanger							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
1600 Sundridge Drive						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43221	0 6	2 3	1 1	200.00	
Full Name of Contributor						Registration Number, if PAC	
Frank W. Courtney							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
2324 Sedgwick Drive						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43220	0 6	2 6	1 1	65.00	
Full Name of Contributor						Registration Number, if PAC	
Anthony M. Disante							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
2835 Wellesley Drive						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43221	0 6	2 5	1 1	100.00	
Full Name of Contributor						Registration Number, if PAC	
Mary Ellen Hatch							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
1942 Collingswood Road						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43221	0 6	2 2	1 1	100.00	
Full Name of Contributor						Registration Number, if PAC	
Mark A. Johnson							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
1903 Brandywine Drive						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	O | H	43220	0 6	2 6	1 1	250.00	

* 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 $ 1,465.00