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R.C	. 351	7.10

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full U.A. Library Levy Campaign				
Full Name of Contributor Robert A. Rapp	Registration Number, if PAC			
Street Address 1379 Southport Drive	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43235	0 9 2 0 1 6	Amount \$100.00
Full Name of Contributor Margaret L. Johnson			Registration Number, if I	PAC
Street Address 5329 Tartan Lane	Employer/Occupation/Labor Organization*			Form (Cash. Check, etc.) Check
City Columbus	State OH	Zip Code 43235	0 9 2 1 1 6	Amount \$25.00
Full Name of Contributor Mary Beth and Thomas Davis			Registration Number, if	7AC
Street Address 1922 Arlington Avenue		pation/Labor Organization		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43212	$\begin{bmatrix} M \\ 0 \end{bmatrix} 9 \begin{bmatrix} D \\ 2 \end{bmatrix} 0 \begin{bmatrix} Y \\ 1 \end{bmatrix} 6$	Amount \$100.00
Full Name of Contributor Charles A. Wilcox	Registration Number, if I			
Street Address 6000 Riverside Drive B226	Employer/Occu	pation/Labor Organization"		Form (Cash, Check, etc.) Check
City Dublin	State OH	Zip Code 43017	0 9 2 1 1 6	Amount \$75.00
Full Name of Contributor MaryAlyce and Walter Ersing			Registration Number, if	
Street Address 2230 Swansea Road	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43221	0 9 2 1 1 6	Amount \$30.00
Full Name of Contributor Vee Shanahan	Registration Number, if	PAC		
Street Address 1872 Riverside Drive, Apt. 10	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43212	M D Y 0 9 2 0 1 6	Amount \$100.00
Full Name of Contributor Jeanne M. and Donald R. Davis			Registration Number, if	PAC
Street Address 1857 Mackenzie Drive	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43221	0 9 2 0 1 6	
Full Name of Contributor The George Foundation			Registration Number, if	PAC
Street Address 2627 Johnston Road	Employer/Occo	upation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43220	M D Y 0 9 2 0 1 6	Amount 5 \$50.00

Page Total \$505.00

^{*} 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 also appear. [R.C. 3517.10(B)(4)]