

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Everyone for Ed Leonard							
Full Name of Contributor Central Ohio Relators PAC					Registration Number, if PAC		
Street Address 2700 Airport Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43219	M 0 5	D 2 0	Y 1 4	Amount 1,250.00	
Full Name of Contributor Derrick R Clay/New Visions Group LLC					Registration Number, if PAC		
Street Address 33 N Third St, Ste 400		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 6	D 0 9	Y 1 4	Amount 100.00	
Full Name of Contributor Mark Corna					Registration Number, if PAC		
Street Address 2101 Abbotsford Green Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Powell	State O H	Zip Code 43065	M 0 6	D 0 9	Y 1 4	Amount 250.00	
Full Name of Contributor Rob Rishel/Rinehart Rishel & Cuckler Ltd					Registration Number, if PAC		
Street Address 300 E Broad St, Ste 450		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 6	D 0 9	Y 1 4	Amount 500.00	
Full Name of Contributor UFCW Local 1059 Active Ballot Club					Registration Number, if PAC LA437		
Street Address 4150 E Main St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43213	M 0 6	D 0 9	Y 1 4	Amount 250.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

* 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)]