31-A
R.C. 3517.10

FOR PAPER FILING ONLY

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Everyone for Ed Leonard								
Full Name of Contributor							**Registration Number, if PAC**	
PNC PAC							C00035519	
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
249 Fifth Ave							Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Pittsburgh	PA	15222	06	22	12		2,000.00	
Full Name of Contributor							**Registration Number, if PAC**	
Roger Whitaker/Luper Neidenthal & Logan, LPA								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
1071 Denman Ct	Luper Neidenthal/Attorney						Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Westerville	OH	43081	06	27	12		500.00	
Full Name of Contributor							**Registration Number, if PAC**	
Frederick Luper/Luper Neidenthal & Logan, LPA								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
360 N. Columbia Ave	Luper Neidenthal/Attorney						Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	OH	43209	06	27	12		500.00	
Full Name of Contributor							**Registration Number, if PAC**	
K. Wallace Neidenthal/ Luper Neidenthal & Logan, LPA								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
6365 Headley Heights Blvd	Luper Neidenthal/Attorney						Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Gahanna	OH	43230	06	27	12		500.00	
Full Name of Contributor							**Registration Number, if PAC**	
Friends of Marilyn Brown								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
550 E. Walnut St							Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	OH	43215	06	27	12		1,000.00	
Full Name of Contributor							**Registration Number, if PAC**	
Nationwide Mutual Insurance Co PAC							C00076174	
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
1 Nationwide Plz							Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	OH	43215	07	13	12		1,000.00	
Full Name of Contributor							**Registration Number, if PAC**	
Shirley A. Rogers-Reece								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
7191 Keystone Ranch Ct	McDonalds/VP						Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Blacklick	OH	43004	07	13	12		250.00	
Full Name of Contributor							**Registration Number, if PAC**	
Christine Emch Thompson								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
7956 Fargo Ln	Ohio State University/Manager						Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Delaware	OH	43015	07	13	12		125.00	

* 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 $ 5,875.00