

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for UA's Future						
Full Name of Contributor Greenhill for City Council					Registration Number, if PAC	
Street Address 2243 Atlee Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 8	Y 2	Amount \$1,000.00
Full Name of Contributor M. Jameson Crane					Registration Number, if PAC	
Street Address 2289 Onandaga Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 8	Y 2	Amount \$500.00
Full Name of Contributor John Bradley Britton					Registration Number, if PAC	
Street Address 4504 Kipling Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 0	Amount \$50.00
Full Name of Contributor EMH&T					Registration Number, if PAC	
Street Address 5500 New Albany Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43054	M 0	D 9	Y 0	Amount \$2,500.00
Full Name of Contributor Linda J. Mauger					Registration Number, if PAC	
Street Address 1247 Kenbrook Hills Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 0	Amount \$100.00
Full Name of Contributor E. Ann Gabriel					Registration Number, if PAC	
Street Address 9 Westfield Place Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Athens	State OH	Zip Code 45701	M 0	D 9	Y 0	Amount \$100.00
Full Name of Contributor Daniel Ralley					Registration Number, if PAC	
Street Address 2085 Northwest Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) PayPal	
City Upper Arlington	State OH	Zip Code 43221	M 0	D 9	Y 0	Amount \$100.00
Full Name of Contributor John M. Adams					Registration Number, if PAC	
Street Address 1566A Oyster Catcher Point		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Naples	State FL	Zip Code 34105	M 0	D 9	Y 0	Amount \$100.00

* 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)]

Page Total **\$4,450.00**