

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>UA CITIZENS FOR RESPONSIBLE ECONOMIC DEVELOPMENT</b>							
Full Name of Contributor <b>COLDWELL KING THOMPSON (SHARON COOK)</b>					Registration Number, if PAC		
Street Address <b>3160 KINGSDALE CENTRE</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>UPPER ARLINGTON</b>	State <b>O   H</b>	Zip Code <b>43221</b>	M <b>1   2</b>	D <b>1   1</b>	Y <b>1   3</b>	Amount <b>25.00</b>	
Full Name of Contributor <b>WELLS FARGO (CHRIS WIDING)</b>					Registration Number, if PAC		
Street Address <b>700 ACKERMAN RD., SUITE 400</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43202</b>	M <b>1   2</b>	D <b>1   1</b>	Y <b>1   3</b>	Amount <b>25.00</b>	
Full Name of Contributor <b>DR. GEORGE P. WICK, DDS</b>					Registration Number, if PAC		
Street Address <b>1234 OLD HENDERSON RD.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43220</b>	M <b>1   2</b>	D <b>1   1</b>	Y <b>1   3</b>	Amount <b>25.00</b>	
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		
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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)]

Page Total \$ 75.00