

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full UA for Foulk									
Full Name of Contributor Clark Anderson							Registration Number, if PAC		
Street Address 2536 Canterbury Road				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Paypal	
City Columbus				State OH		Zip Code 43221		M D Y 0 1 0 3 1 7 Amount \$250.00	
Full Name of Contributor Carol Anderson							Registration Number, if PAC		
Street Address 2536 Canterbury Road				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus				State OH		Zip Code 43221		M D Y 0 3 2 2 1 7 Amount \$250.00	
Full Name of Contributor Jane E. Leach							Registration Number, if PAC		
Street Address 2471 Sherwood Villa				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus				State OH		Zip Code 43221		M D Y 0 6 2 0 1 7 Amount \$100.00	
Full Name of Contributor John C. Deal							Registration Number, if PAC		
Street Address 2575 Wexford Road				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus				State OH		Zip Code 43221		M D Y 0 6 2 0 1 7 Amount \$100.00	
Full Name of Contributor Dorothy Myers							Registration Number, if PAC		
Street Address 2865 Pickwick Drive				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus				State OH		Zip Code 43221		M D Y 0 7 0 6 1 7 Amount \$200.00	
Full Name of Contributor Dorothy Foulk							Registration Number, if PAC		
Street Address 3151 Fellswood Lane				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Port Neches				State TX		Zip Code 77651		M D Y 0 7 0 6 1 7 Amount \$200.00	
Full Name of Contributor Suzanne Cruickshank							Registration Number, if PAC		
Street Address 2817 Wickliffe Road				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Columbus				State OH		Zip Code 43221		M D Y 0 7 0 7 1 7 Amount \$100.00	
Full Name of Contributor William Foulk							Registration Number, if PAC		
Street Address 510 Meadowgreen Drive				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check	
City Port Neches				State TX		Zip Code 77651		M D Y 0 7 0 6 1 7 Amount \$50.00	

* 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 **\$1,250.00**