

FOR PAPER FILING ONLY

Statement of Contributions Received

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Prescribed by Secretary of State 3/05

Name of Committee in Full Everyone for Ed Leonard							
Full Name of Contributor Llyod Pierre-Louis					Registration Number, if PAC		
Street Address 6227 Beringer Dr		Employer/Occupation/Labor Organization* Wesp/Barwell/Attorney			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0	D 8	Y 3	Amount 250.00	
Full Name of Contributor Taft Stettinius & Hollister Better Government Fund					Registration Number, if PAC OH 1146		
Street Address 425 Walnut St, Ste 1800		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Cincinnati	State O H	Zip Code 45202	M 0	D 8	Y 3	Amount 250.00	
Full Name of Contributor CPM Law PAC					Registration Number, if PAC OH 1505		
Street Address 366 E Broad St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0	D 8	Y 3	Amount 500.00	
Full Name of Contributor George J. Kontogiannis					Registration Number, if PAC		
Street Address 400 S Fifth St, Ste 400		Employer/Occupation/Labor Organization* Colonial American Develop/President			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0	D 8	Y 3	Amount 500.00	
Full Name of Contributor Robert J. Meyers					Registration Number, if PAC		
Street Address 136 Stanbery Ave		Employer/Occupation/Labor Organization* Lawyers Development Group/President			Form (Cash, Check, etc.) Check		
City Bexley	State O H	Zip Code 43209	M 0	D 8	Y 3	Amount 1,000.00	
Full Name of Contributor Laura Comek/Crabbe Brown & James					Registration Number, if PAC		
Street Address 500 S Front St, Ste 1200		Employer/Occupation/Labor Organization* Crabbe Brown & James/Attorney			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0	D 8	Y 3	Amount 1,500.00	
Full Name of Contributor Douglas J. Godard					Registration Number, if PAC		
Street Address 2030 Cambridge Blvd		Employer/Occupation/Labor Organization* CBRE/President			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43221	M 0	D 9	Y 1	Amount 100.00	
Full Name of Contributor J. Michael Cook					Registration Number, if PAC		
Street Address 3976-A Granger Rd		Employer/Occupation/Labor Organization* None/Retired			Form (Cash, Check, etc.) Check		
City Medina	State O H	Zip Code 44256	M 0	D 9	Y 1	Amount 250.00	

* 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 \$ 4,350.00