

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Carolyn Casper for UA Council</b>										Registration Number, if PAC			
Full Name of Contributor <b>Mary Ann Krauss</b>										Form (Cash, Check, etc.) <b>check</b>			
Street Address <b>1980 Upper Chelsea Rd</b>				Employer/Occupation/Labor Organization*				M D Y		Amount			
City <b>Upper Arlington</b>				State <b>O H</b>		Zip Code <b>43221</b>		<b>0 8 2 6 1 9</b>		<b>50.00</b>			
Full Name of Contributor <b>Judith Yesso</b>										Registration Number, if PAC			
Street Address <b>3005 Welsford Rd</b>				Employer/Occupation/Labor Organization*				M D Y		Form (Cash, Check, etc.) <b>check</b>			
City <b>Columbus</b>				State <b>O H</b>		Zip Code <b>43221</b>		<b>0 8 2 0 1 9</b>		<b>50.00</b>			
Full Name of Contributor <b>Carrie Richele O'Connor</b>										Registration Number, if PAC			
Street Address <b>1637 Berkshire Rd</b>				Employer/Occupation/Labor Organization*				M D Y		Form (Cash, Check, etc.) <b>check</b>			
City <b>Upper Arlington</b>				State <b>O H</b>		Zip Code <b>43221-3907</b>		<b>0 8 1 9 1 9</b>		<b>250.00</b>			
Full Name of Contributor <b>Alice Faryna</b>										Registration Number, if PAC			
Street Address <b>1814 Maxfield Dr</b>				Employer/Occupation/Labor Organization*				M D Y		Form (Cash, Check, etc.) <b>check</b>			
City <b>Columbus</b>				State <b>O H</b>		Zip Code <b>43212-1803</b>		<b>0 8 2 1 1 9</b>		<b>100.00</b>			
Full Name of Contributor <b>John J Kulewicz</b>										Registration Number, if PAC			
Street Address <b>2104 Yorkshire Rd</b>				Employer/Occupation/Labor Organization*				M D Y		Form (Cash, Check, etc.) <b>check</b>			
City <b>Upper Arlington</b>				State <b>O H</b>		Zip Code <b>43221</b>		<b>0 8 2 7 1 9</b>		<b>250.00</b>			
Full Name of Contributor <b>Bryne Warehousing</b>										Registration Number, if PAC			
Street Address <b>4317 Camborne Rd</b>				Employer/Occupation/Labor Organization*				M D Y		Form (Cash, Check, etc.) <b>check</b>			
City <b>Columbus</b>				State <b>O H</b>		Zip Code <b>43220</b>		<b>0 8 2 2 1 9</b>		<b>500.00</b>			
Full Name of Contributor <b>Carole A Lunnev</b>										Registration Number, if PAC			
Street Address <b>2393 Beaumont Rd</b>				Employer/Occupation/Labor Organization*				M D Y		Form (Cash, Check, etc.) <b>check</b>			
City <b>Upper Arlington</b>				State <b>O H</b>		Zip Code <b>43221-3930</b>		<b>0 8 2 7 1 9</b>		<b>250.00</b>			
Full Name of Contributor <b>Connie L Roberts</b>										Registration Number, if PAC			
Street Address <b>1162 Virginia Ave</b>				Employer/Occupation/Labor Organization*				M D Y		Form (Cash, Check, etc.) <b>check</b>			
City <b>Columbus</b>				State <b>O H</b>		Zip Code <b>43212</b>		<b>0 9 0 4 1 9</b>		<b>35.00</b>			

\* 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)]