

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Royer For UA Schools									
Full Name of Contributor Noelle Fox						Registration Number, if PAC			
Street Address 2396 Middlesex Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43220	M 1 0	D 1 1	Y 1 5	Amount 25.00			
Full Name of Contributor E.D. & Janet Svensson						Registration Number, if PAC			
Street Address 1815 Maxfield Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43212	M 1 0	D 0 7	Y 1 5	Amount 100.00			
Full Name of Contributor Michael & Mikelles Copella						Registration Number, if PAC			
Street Address 2296 Yorkshire Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43221	M 0 9	D 2 8	Y 1 5	Amount 100.00			
Full Name of Contributor Murray Murphy Moul & Basil LLP (Joe Murray)						Registration Number, if PAC			
Street Address 1114 Dublin Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 0	D 0 5	Y 1 5	Amount 250.00			
Full Name of Contributor The Richard J Connie Co. (Richard J Connie)						Registration Number, if PAC			
Street Address 3300 Riverside Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 1 0	D 0 5	Y 1 5	Amount 100.00			
Full Name of Contributor Citizens for Yassenoff						Registration Number, if PAC CP 1058			
Street Address 1900 Hampshire Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 8	D 2 5	Y 1 5	Amount 150.00			
Full Name of Contributor Central Ohio Political Action Committee						Registration Number, if PAC a local PAC			
Street Address 2700 Airport Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43219	M 1 0	D 0 1	Y 1 5	Amount 250.00			
Full Name of Contributor Contributions From Form No.31-E						Registration Number, if PAC			
Street Address 1114 Dublin Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City Columbus	State O H	Zip Code 43215	M 1 0	D 0 1	Y 1 5	Amount 2,475.00			

* 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)]