

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full UA Library Levy Campaign							
Full Name of Contributor Anonymous					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Cash		
City	State	Zip Code	M	D	Y	Amount 20.00	
			0	4	2	3	0
Full Name of Contributor Mary Janice Sawyer					Registration Number, if PAC		
Street Address 1858 Langham Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M	D	Y	Amount 10.00	
			0	4	2	4	0
Full Name of Contributor Bonnie Emery					Registration Number, if PAC		
Street Address 1991 Suffold Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43221	M	D	Y	Amount 25.00	
			0	4	2	3	0
Full Name of Contributor George Hadler					Registration Number, if PAC		
Street Address 2477 Southway Dr.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M	D	Y	Amount 100.00	
			0	4	2	3	0
Full Name of Contributor Karen Mader					Registration Number, if PAC		
Street Address 2873 Eastcleft Dr.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43221	M	D	Y	Amount 25.00	
			0	4	2	3	0
Full Name of Contributor Bricker & Eckler LLP					Registration Number, if PAC		
Street Address 100 S. Third St.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M	D	Y	Amount 100.00	
			0	4	2	0	0
Full Name of Contributor Diane Brant					Registration Number, if PAC		
Street Address 84 E. Longview Ave.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43202	M	D	Y	Amount 15.00	
			0	5	0	2	0
Full Name of Contributor Laura MacDonald					Registration Number, if PAC		
Street Address 3864 Mountview Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M	D	Y	Amount 30.00	
			0	4	1	7	0

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 \$ 325.00