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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

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Name of Committee in Full								
Citizens for Leeseberg								
	Il Name of Contributor			Registration Number, if PAC				
Larry and Donna James								
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)		
1 Miranova Pl, Apt 1040						Check		
City	State	Zip Code	М	D	Y	Amount		
Columbus	O   H	43215	0 1	2 2	1 8	500.00		
Full Name of Contributor					nber, if PA			
Street Address	Employer/Occu	_			Form (Cash, Check, etc.)			
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City	State	Zip Code	М	D	ΙΥ	Amount		
Chy	State	Zip Code	M		1 1	Amount		
T. II N			D		1 674	^		
Full Name of Contributor			Kegistra	ation Nur	nber, if PA	ic.		
Street Address	Employer/Occi	pation/Labor Organization*				Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount		
Full Name of Contributor			Registra	ation Nur	nber, if PA	vC .		
Street Address	Employer/Occu	pation/Labor Organization*			·	Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount		
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Full Name of Contributor			Registra	ation Nur	nber, if PA	C		
			ľ		,			
Street Address	Employer/Occi	<u> </u>			Form (Cash, Check, etc.)			
		Employer/Occupation/Labor Organization*						
City	State	Zip Code	М	D	Y	Amount		
chy	June	Zip Codt			1 1	Allouit		
P. H.N. CO. A.N. A.		<u> </u>		1 N	-b CDA	<u> </u>		
Full Name of Contributor			Registra	auon nun	nber, if PA			
Street Address Employer/Occupation/Labor Organization*								
Street Address	Form (Cash, Check, etc.)							
					,			
City	State	Zip Code	M	D	Y	Amount		
Full Name of Contributor		•	Registra	ation Nur	nber, if PA	ı.C		
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount		
				1 1				
Full Name of Contributor			Registra	ation Nun	nber, if PA	.C		
			ا ا					
Street Address Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount		
eny I	I	Exp Code	, M		1 1	a sandwill		
<u> </u>		I						

Page Total \$ 500.00

<sup>\*</sup> 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)]