_	22	
Page	22	

Statement of Contributions Received

Prescribed by Secretary of State 3/05

<u> </u>							
Name of Committee in Full							
Leach for UA Council			In ·		1681		
Full Name of Contributor			Registra	tion Num	ber, if PA	L	
Melissa K. Hedden					,	n (n · -	
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Ch	eck, etc.)
2491 Lane Road				,		Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OIH	43220	0 9	0 9	1 5	l	250.00
Full Name of Contributor			Registra	tion Num	ber, if PA	.c	
Susan M. Ralph							
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Ch	eck, etc.)
4090 Bayberry Court						Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	0 H	43220	019	019	1 5	<u> </u>	100.00
Full Name of Contributor	1	<u> </u>		tion Num		.c	
John M. Yesso							
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
3005 Welsford Road		-				Check	
City	State	Zip Code	М	D	Y	Amount	
Columbus	OH		019	019	115		100.00
Full Name of Contributor	1010	1 10		tion Num		C	
John W. Rover							
Street Address	Employer/Occi	pation/Labor Organization*				Form (Cash, Ch	eck, etc.)
[1	тыры устоесираныя слот отданальный			Check		
1480 Dublin Road	State	Zip Code	T M	l D	Υ	Amount	
City	OH	· ·	·	10	l .		250.00
Columbus	1011	40410		tion Num			230.00
Full Name of Contributor			, cgisus	1441	~***		
Mary J. Founds	Ig1/0	mation(Labor O-conitation*				Form (Cash, Ch	eck. etc.)
Street Address	Employer/Occi	Employer/Occupation/Labor Organization*		Check			
4922 Stonehaven Drive		Zi- Code	M	D	ΙΥ	Amount	
City	State	Zip Code	1	I .			100.00
Columbus	O H	43220	0 9		1 5		100.00
Full Name of Contributor			Registra	ttion Num	wet, ii PA		
Ruth McNeil	<u> </u>					E (C C	ank eta \
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)				
1494 Lafayette Drive, Apt. B			1	т	T 1	Check	
City	State	Zip Code	M	D	Y	Amount	50.00
Upper Arlington	O H	43220	0 9				50.00
Full Name of Contributor			Registra	tion Nur	ber, if PA	AC	
Daniel Overmyer						Y	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)				
2571 Clarion Court						PayPal	
City	State	Zip Code	М	D	Y,	Amount	
Columbus	0 H	43220		1 8			100.00
Full Name of Contributor Registration Number, if PAC							
Mary Duffey							
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
4740 Havden Run Road			PayPal				
City	State	Zip Code	M	D	Y	Amount	
Columbus	015	43221	019	1 8	115	<u>1</u>	100.00

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 S	1,050.00
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