

FOR PAPER FILING ONLY

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens For UA's Future							
Full Name of Contributor Phil Glandon					Registration Number, if PAC		
Street Address 2117 Elgin Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43221	M 0	D 9	Y 1 1 1 4	Amount 200	
Full Name of Contributor Brent C. Taggart					Registration Number, if PAC		
Street Address 2069 Fairfax Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State OH	Zip Code 43221	M 0	D 9	Y 1 1 1 4	Amount 100	
Full Name of Contributor John M. Yesso					Registration Number, if PAC		
Street Address 3005 Welsford Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43221	M 0	D 9	Y 1 1 1 4	Amount 200	
Full Name of Contributor Barbara K. Sauter					Registration Number, if PAC		
Street Address 1135 Regency Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 1 1 1 4	Amount 100	
Full Name of Contributor Glenda K. Huffman					Registration Number, if PAC		
Street Address 2695 Henthorn Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State OH	Zip Code 43221	M 0	D 9	Y 1 1 1 4	Amount 200	
Full Name of Contributor Dianne P. Albrecht					Registration Number, if PAC		
Street Address 3990 Newhall Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 1 1 1 4	Amount 300	
Full Name of Contributor William H. Kraft					Registration Number, if PAC		
Street Address 4312 Waybourn Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 1 1 1 4	Amount 1000	
Full Name of Contributor Linda J. Moulakis					Registration Number, if PAC		
Street Address 4120 Mumford Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 1 1 1 4	Amount 100	

* 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 also appear. [R.C. 3517.10(B)(4)]

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