Page 9

Statement of Contributions Received

Prescribed by Secretary of State 3/05

une of Committee in Full						
Carolyn Casper for UA Council			Registration Number,	f PAC		
Il Name of Contributor			Registration (vanoci,			
Tara L Ratzel				Form (Cash, Check, etc.)		
reet Address	Employer/Occupation/Labor Organization*			i i	check	
2703 Bristol Rd		. — — — —	MD			
ty	State Zip Cod		$\begin{bmatrix} 0 & 9 & 0 & 4 & 1 \end{bmatrix}$	i	50.00	
Columbus	O H 432	221-1103	Registration Number,			
Il Name of Contributor			Registration (values);			
Mary C Woods			<u> </u>	Form (Cash.	Check, etc.)	
reet Address	Employer/Occupation/Labor Organization*				check	
357 Pinney Drive			TM D	Y Amount		
	State Zip Co		1 1 - 1	·	50.00	
ity	O H 430	085	0 9 0 8 1 Registration Number	if PAC	00.00	
Worthington ull Name of Contributor			Registration Number	, II FAC		
				Form (Cash	, Check, etc.)	
Estelle M Scott	Employer/Occupation/Labor Organization*			checl		
itreet Address						
1553 Fishinger Rd	State Zip Co	ode	M D	Y Amount	50.00	
City	U H 43	3221		1:9	30.00	
Columbus			Registration Number	r, if PAC		
full Name of Contributor		_			h, Check, etc.)	
Ronald F Arledge	Employer/Occupation/Labor Organization*					
Street Address	,			chec	K	
2547 Swansea Rd	State Zip C	ode	M D	Y Amount	F0.00	
City		3221	0 9 1 5	1 9	50.00	
Columbus			Registration Number	er, if PAC		
Full Name of Contributor						
UA Progressive Action	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
Street Address	Limpioy			chec	:k	
PO Box 21224	State Zip C	Code	M D	Y Amount	250.00	
City	1	3221	0 9 2 3	1 9	250.00	
Upper Arlington		<u> </u>	Registration Numb	er, if PAC		
Full Name of Contributor						
Mary G MacVicar	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
Street Address	Employer, Occupations	54001 - 5		che	ck	
3153 Bembridge Rd	State Zin	Code	M D	Y Amount		
City		13221-2203	0 9 1 7	1 9	50.0	
Columbus	O H 4	5221-2200	Registration Num	ber, if PAC		
Full Name of Contributor						
Kathleen E Lach		T. bar Organization*		Form (C	ash, Check, etc.)	
Street Address	Employer/Occupation/Labor Organization*			che	eck	
3910 Lyon Rd	Tr. Codo M		IM D	Y Amount		
	I - I	Code	0 9 0 8	1 9	100.0	
Columbus	OH	43220	Registration Num			
Full Name of Contributor						
Theis Research & Consulting			!	Form (C	Cash, Check, etc.)	
	Employer/Occupation/Labor Organization*				check	
Street Address 433 E Whittier St		The state of the s				
	State Zip Code			Y Amoun	250.0	
City Columbus	de and general assembly candidate	43206-2326	0 9 0 7	1 7 1		

* 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 \$

Page Total \$	850.00
· —	