

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee to Elect Sue Ralph							
Full Name of Contributor Deborah A. Johnson					Registration Number, if PAC		
Street Address 1903 Brandwine Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43220	M 1 0	D 1 1	Y 1 6	Amount 250.00	
Full Name of Contributor Donald B. Leach					Registration Number, if PAC		
Street Address 1236 Kenbrook Hills Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43220	M 1 0	D 1 1	Y 1 6	Amount 200.00	
Full Name of Contributor Jane D. Leach					Registration Number, if PAC		
Street Address 1236 Kenbrook Hills Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43220	M 1 0	D 1 1	Y 1 6	Amount 200.00	
Full Name of Contributor Mary Susan Westbrook					Registration Number, if PAC		
Street Address 1974 Keswick Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 1 0	D 1 1	Y 1 6	Amount 200.00	
Full Name of Contributor Steven Sims					Registration Number, if PAC		
Street Address 2348 Edington Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43220	M 1 0	D 1 1	Y 1 6	Amount 200.00	
Full Name of Contributor T. Paul Evans					Registration Number, if PAC		
Street Address 1220 Marilyn Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 1 0	D 1 1	Y 1 6	Amount 200.00	
Full Name of Contributor Jenny Lou Renkert					Registration Number, if PAC		
Street Address 2160 McCoy Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 1 0	D 1 1	Y 1 6	Amount 50.00	
Full Name of Contributor Alice Epitropoulos					Registration Number, if PAC		
Street Address 5005 Squirrel Bend		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43220	M 1 0	D 1 1	Y 1 6	Amount 50.00	

* 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 \$ 1,350.00