

Statement of Contributions Received

Prescribed by Secretary of State 3/05

| | | | | | | | |
|--|-----------------------|---|-------------------|-------------------|--|-------------------------|--|
| Name of Committee in Full Leach for UA Council | | | | | | | |
| Full Name of Contributor Rosalee Leach | | | | | Registration Number, if PAC | | |
| Street Address 1800 Riverside Drive, Apt. 2210 | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Check | | |
| City Upper Arlington | State O H | Zip Code 43212 | M 0 5 | D 0 1 | Y 1 1 | Amount 250.00 | |
| Full Name of Contributor Susan L. Madden | | | | | Registration Number, if PAC | | |
| Street Address 25 Berwick Road | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Check | | |
| City Newton Center | State M A | Zip Code 02459 | M 0 5 | D 1 5 | Y 1 1 | Amount 200.00 | |
| Full Name of Contributor Robert H. Doyle | | | | | Registration Number, if PAC | | |
| Street Address 2253 Darbyshire Drive | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Check | | |
| City Beavercreek | State O H | Zip Code 45440 | M 0 6 | D 0 2 | Y 1 1 | Amount 250.00 | |
| Full Name of Contributor Pamela Bridgeport | | | | | Registration Number, if PAC | | |
| Street Address 3691 Romnay Road | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Check | | |
| City Upper Arlington | State O H | Zip Code 43220 | M 0 6 | D 0 6 | Y 1 1 | Amount 250.00 | |
| Full Name of Contributor James C. Furgason | | | | | Registration Number, if PAC | | |
| Street Address 2503 Brixton Road | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Check | | |
| City Columbus | State O H | Zip Code 43221 | M 0 6 | D 0 6 | Y 1 1 | Amount 50.00 | |
| Full Name of Contributor Eileen Lazear | | | | | Registration Number, if PAC | | |
| Street Address 1800 Ardleigh Road | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Check | | |
| City Upper Arlington | State O H | Zip Code 43221 | M 0 6 | D 0 6 | Y 1 1 | Amount 25.00 | |
| Full Name of Contributor Li Yu Lee | | | | | Registration Number, if PAC | | |
| Street Address 1109 Millcreek Lane | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) | | |
| City Columbus | State O H | Zip Code 43220 | M 0 6 | D 0 6 | Y 1 1 | Amount 35.00 | |
| Full Name of Contributor Katie A. Merrill | | | | | Registration Number, if PAC | | |
| Street Address 3087 Brandon Road | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Check | | |
| City Columbus | State O H | Zip Code 43221 | M 0 6 | D 0 6 | Y 1 1 | Amount 30.00 | |

* 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 \$ 1,090.00