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## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full U.A. Library Levy Campaign						
Full Name of Contributor Lenore E. Mastracci	Registration Number, if PAC					
Street Address 1826 Westwood Avenue	Employer/Occu	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43212	0 9 1 9 1 6	Amount \$25.00		
Full Name of Contributor F.A. and J.M. Healy	4-	•	Registration Number, if P	PAC		
Street Address 2098 Ellington Road	Employer/Occu	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43221	0 9 2 0 1 6	Amount \$100.00		
Full Name of Contributor Donna and Daniel Donovan						
Street Address 2225 Land Road	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43220	0 9 1 9 1 6	Amount \$40.00		
Full Name of Contributor Ann and Marc Myers	PAC					
Street Address 4283 Lyon Drive	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43220	0 9 2 0 1 6	Amount \$100.00		
Full Name of Contributor  Marilyn G. Hood			Registration Number, if F	PAC		
Street Address 3310 Sommerford Road	Employer/Occu	pation/Labor Organization*	······································	Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43221	0 9 1 9 1 6	Amount \$25.00		
Full Name of Contributor Margaret W. and Peter J. Janotka	Registration Number, if F					
Street Address 3106 Somerford Road	Employer/Occu	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43221	0 9 1 9 1 6	Amount \$25.00		
Full Name of Contributor  The Menke Family  Registration Number, if F						
Street Address 2170 Yorkshire Road	Employer/Occu	pation/Labor Organization*	-	Form (Cash, Check, etc.) Check		
City Columbus	Stafe OH	Zip Code 43221	M D Y O 1 6	Amount \$50.00		
Full Name of Contributor  Margaret and Paul Braunsdorf			Registration Number, if I	PÄC		
Street Address 2235 Haviland Road	Employer/Occi	pation/Labor Organization		Form (Cash, Check, etc.)  Check		
City Columbus	State OH	Zip Code 43220	M D Y O 1 6	Amount \$25.00		

Page Total \$390.00

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