

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Paley for Columbus</b>							
Full Name of Contributor <b>United Steelworkers District 1 PCE</b>						Registration Number, if PAC	
Street Address <b>777 Dearborn Park Ln Ste. J</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City <b>Worthington</b>		State <b>OH</b>	Zip Code <b>43085</b>		M <b></b>	D <b></b>	Y <b></b>
						Amount <b>\$100.00</b>	
Full Name of Contributor <b>Howard Heard</b>						Registration Number, if PAC	
Street Address <b>1732 Cole Ave.</b>			Employer/Occupation/Labor Organization* <b>BOE - CLERK</b>			Form (Cash, Check, etc.) check	
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43205</b>		M <b></b>	D <b></b>	Y <b></b>
						Amount <b>\$50.00</b>	
Full Name of Contributor <b>John &amp; Kristine Salo</b>						Registration Number, if PAC	
Street Address <b>291 Marlborough St. Apt 2</b>			Employer/Occupation/Labor Organization* <b>BROWN &amp; CALDWELL-VP BEST EFFORTS</b>			Form (Cash, Check, etc.) check	
City <b>Boston</b>		State <b>MA</b>	Zip Code <b>02116</b>		M <b></b>	D <b></b>	Y <b></b>
						Amount <b>\$500.00</b>	
Full Name of Contributor <b>United Health Group Political Fund</b>						Registration Number, if PAC	
Street Address <b>P.O.Box 64854</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City <b>St. Paul</b>		State <b>MI</b>	Zip Code		M <b></b>	D <b></b>	Y <b></b>
						Amount <b>\$1,000.00</b>	
Full Name of Contributor <b>Nationwide Better Citizenship FD</b>						Registration Number, if PAC <b>04259</b>	
Street Address <b>One Nationwide Plaza 1-32-06</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>		M <b>0</b>	D <b>5</b>	Y <b>2</b>
						Amount <b>\$500.00</b>	
Full Name of Contributor <b>Frank Watson</b>						Registration Number, if PAC	
Street Address <b>1469 Picard Rd.</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43227</b>		M <b>1</b>	D <b>0</b>	Y <b>2</b>
						Amount <b>\$25.00</b>	
Full Name of Contributor <b>Nancy Wonell</b>						Registration Number, if PAC	
Street Address <b>330 S. High St.</b>			Employer/Occupation/Labor Organization* <b>Attorney, Self</b>			Form (Cash, Check, etc.) check	
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>		M <b>1</b>	D <b>0</b>	Y <b>8</b>
						Amount <b>\$50.00</b>	
Full Name of Contributor						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City		State	Zip Code		M	D	Y
						Amount	

\* 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)]

Page Total **\$2,225.00**