

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for UA's Future						
Full Name of Contributor Mark K. Milligan				Registration Number, if PAC		
Street Address 1275 Fountaine Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 9	Y 0314	Amount \$250.00
Full Name of Contributor Debra H. Marsh				Registration Number, if PAC		
Street Address 2794 Lymington Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 0314	Amount \$50.00
Full Name of Contributor Burgess & Niple				Registration Number, if PAC		
Street Address 5085 Reed Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 0314	Amount \$5,000.00
Full Name of Contributor Bailey Cavalieri LLC - William A. Adams				Registration Number, if PAC		
Street Address 10 West Broad Street, Suite 2100		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 9	Y 0514	Amount \$3,000.00
Full Name of Contributor Link R. Murphy, M.D.				Registration Number, if PAC		
Street Address 2400 Wenbury Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 0514	Amount \$25.00
Full Name of Contributor Elizabeth B. Riley				Registration Number, if PAC		
Street Address 4732 Stonehaven Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 0514	Amount \$100.00
Full Name of Contributor Priscilla D. Mead				Registration Number, if PAC		
Street Address 1399 La Rochelle Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 9	Y 0514	Amount \$50.00
Full Name of Contributor John C. Adams				Registration Number, if PAC		
Street Address 2310 Dorset Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 9	Y 0514	Amount \$500.00

* 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)]

Page Total **\$8,975.00**