

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

|                                                              |                       |                                         |                   |                   |                                          |                         |  |
|--------------------------------------------------------------|-----------------------|-----------------------------------------|-------------------|-------------------|------------------------------------------|-------------------------|--|
| Name of Committee in Full<br><b>UA Library Levy Campaign</b> |                       |                                         |                   |                   |                                          |                         |  |
| Full Name of Contributor<br><b>Theodore Bieber</b>           |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>2722 Woodstock Rd.</b>                  |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>                                      | State<br><b>O   H</b> | Zip Code<br><b>43221</b>                | M<br><b>0   4</b> | D<br><b>0   1</b> | Y<br><b>0   9</b>                        | Amount<br><b>50.00</b>  |  |
| Full Name of Contributor<br><b>Don Cook</b>                  |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>2585 Canterbury Rd.</b>                 |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>                                      | State<br><b>O   H</b> | Zip Code<br><b>43221</b>                | M<br><b>0   4</b> | D<br><b>0   1</b> | Y<br><b>0   9</b>                        | Amount<br><b>25.00</b>  |  |
| Full Name of Contributor<br><b>Susan Eisenman</b>            |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>3363 Tremont</b>                        |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>                                      | State<br><b>O   H</b> | Zip Code<br><b>43221</b>                | M<br><b>0   4</b> | D<br><b>0   1</b> | Y<br><b>0   9</b>                        | Amount<br><b>25.00</b>  |  |
| Full Name of Contributor<br><b>Dan Jones</b>                 |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>2726 Wexford Rd.</b>                    |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>                                      | State<br><b>O   H</b> | Zip Code<br><b>43221</b>                | M<br><b>0   4</b> | D<br><b>0   1</b> | Y<br><b>0   9</b>                        | Amount<br><b>25.00</b>  |  |
| Full Name of Contributor<br><b>Joan Mast</b>                 |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>2833 Wickliffe Rd.</b>                  |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>                                      | State<br><b>O   H</b> | Zip Code<br><b>43221</b>                | M<br><b>0   4</b> | D<br><b>0   1</b> | Y<br><b>0   9</b>                        | Amount<br><b>25.00</b>  |  |
| Full Name of Contributor<br><b>Charles Motil</b>             |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>2770 Elginfield Rd.</b>                 |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>                                      | State<br><b>O   H</b> | Zip Code<br><b>43220</b>                | M<br><b>0   4</b> | D<br><b>0   1</b> | Y<br><b>0   9</b>                        | Amount<br><b>100.00</b> |  |
| Full Name of Contributor<br><b>Clark Pritchett</b>           |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>4185 Chadbourne Dr.</b>                 |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>                                      | State<br><b>O   H</b> | Zip Code<br><b>43220</b>                | M<br><b>0   4</b> | D<br><b>0   1</b> | Y<br><b>0   9</b>                        | Amount<br><b>50.00</b>  |  |
| Full Name of Contributor<br><b>Brrent Taggart</b>            |                       |                                         |                   |                   | Registration Number, if PAC              |                         |  |
| Street Address<br><b>2069 Fairfax Rd.</b>                    |                       | Employer/Occupation/Labor Organization* |                   |                   | Form (Cash, Check, etc.)<br><b>Cash</b>  |                         |  |
| City<br><b>Columbus</b>                                      | State<br><b>O   H</b> | Zip Code<br><b>43221</b>                | M<br><b>0   4</b> | D<br><b>0   1</b> | Y<br><b>0   9</b>                        | Amount<br><b>50.00</b>  |  |

\* 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)]