

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Leach for UA Council							
Full Name of Contributor Lynn N. Ness					Registration Number, if PAC		
Street Address 3655 Waldo Place		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 0	D 6	Y 2	Amount 100.00	
Full Name of Contributor Parr Peterson					Registration Number, if PAC		
Street Address 2840 Pickwick Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0	D 7	Y 0	Amount 100.00	
Full Name of Contributor Karen L. Trotter					Registration Number, if PAC		
Street Address 2650 Sandover Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 0	D 7	Y 0	Amount 50.00	
Full Name of Contributor David DeCapua					Registration Number, if PAC		
Street Address 2101 Yorkshire Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43221	M 0	D 7	Y 0	Amount 150.00	
Full Name of Contributor Anne E. Croskey					Registration Number, if PAC		
Street Address 3586 Reed Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0	D 7	Y 0	Amount 100.00	
Full Name of Contributor William Gregory Guy					Registration Number, if PAC		
Street Address 5810 Shier Rings Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43018	M 0	D 7	Y 0	Amount 50.00	
Full Name of Contributor Kathy A. Panning					Registration Number, if PAC		
Street Address 1990 Upper Chelsea Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0	D 7	Y 0	Amount 25.00	
Full Name of Contributor Ida I. Copenhagen					Registration Number, if PAC		
Street Address 2448 Edington Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0	D 7	Y 1	Amount 45.00	

* 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 \$ **620.00**