

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Carolyn Casper for UA Council										
Full Name of Contributor Francis C Greenhill						Registration Number, if PAC				
Street Address 2243 Atlee Ct			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check			
City Upper Arlington			State O H		Zip Code 43220-5425		M 0	D 8	Y 2 7 1 9	Amount 250.00
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 O H		Zip Code 43221-1531		M 0	D 8	Y 2 2 1 9	Amount 250.00
Full Name of Contributor Ann L Buchfinck						Registration Number, if PAC				
Street Address 1815 Mackenzie Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check			
City Columbus			State O H		Zip Code 43220		M 0	D 8	Y 2 7 1 9	Amount 50.00
Full Name of Contributor Catherine S Logsdon						Registration Number, if PAC				
Street Address 2608 Trotterslane Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check			
City Columbus			State O H		Zip Code 43235		M 0	D 9	Y 0 8 1 9	Amount 25.00
Full Name of Contributor Herbert A Hedden						Registration Number, if PAC				
Street Address 2491 Lane Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check			
City Columbus			State O H		Zip Code 43220-2831		M 0	D 9	Y 0 8 1 9	Amount 250.00
Full Name of Contributor Melissa K Hedden						Registration Number, if PAC				
Street Address 2491 Lane Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check			
City Columbus			State O H		Zip Code 43220-2831		M 0	D 9	Y 0 8 1 9	Amount 250.00
Full Name of Contributor Mary C Woods						Registration Number, if PAC				
Street Address 357 Pinney Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check			
City Worthington			State O H		Zip Code 43085		M 0	D 9	Y 0 8 1 9	Amount 50.00
Full Name of Contributor Estelle M Scott						Registration Number, if PAC				
Street Address 1553 Fishinger Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check			
City Columbus			State O H		Zip Code 43221		M 0	D 9	Y 1 6 1 9	Amount 50.00

* 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)]