

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full UA Library Levv Campaign							
Full Name of Contributor Dan Boda					Registration Number, if PAC		
Street Address 2225 Lane Woods Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 1 2	D 3 0	Y 1 1	Amount 100.00	
Full Name of Contributor Sandra K. Grasso					Registration Number, if PAC		
Street Address 1838 Riverhill Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 1 2	D 3 0	Y 1 1	Amount 25.00	
Full Name of Contributor Mary Ann Krauss					Registration Number, if PAC		
Street Address 1980 Upper Chelsea Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 1 2	D 3 0	Y 1 1	Amount 100.00	
Full Name of Contributor Sarah Magill					Registration Number, if PAC		
Street Address 2756 Andover Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 1 2	D 3 0	Y 1 1	Amount 50.00	
Full Name of Contributor Kathy L. Green					Registration Number, if PAC		
Street Address 2261 Pinebrook Rd..		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 1 2	D 3 0	Y 1 1	Amount 20.00	
Full Name of Contributor Katherine E. Porter					Registration Number, if PAC		
Street Address 4602 Tuttle Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 1 2	D 3 0	Y 1 1	Amount 25.00	
Full Name of Contributor A.P. Sharpe					Registration Number, if PAC		
Street Address 1358 Northwest Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 1 2	D 3 0	Y 1 1	Amount 1,000.00	
Full Name of Contributor Barbara Muller					Registration Number, if PAC		
Street Address 4171 Clairmont Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 1 2	D 3 0	Y 1 1	Amount 100.00	

* 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)]