

FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX	CONTRIBUTING ENTITY	PAC REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP	FORM OF CONTRIBUTION	DATE OF CONTRIBUTION	AMOUNT
Thomas	C	Kruse				4735 Vista Ridge Drive	Dublin	OH	43017	Check	4/18/06	\$500.00
				United Healthcare of Ohio Inc PAC	CP384	9200 Worthington Rd	Westerville	OH	43082	Check	4/18/06	\$1,000.00
Robert	S	Long				2064 Waltham Road	Upper Arlington	OH	43221	Check	4/6/06	\$1,000.00
												\$89,750.00