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R	C	351	7	10

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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

N (Committee à Full				_				
Name of Committee in Full								
Debbie Johnson for UA Council			In :		1 1001			
Full Name of Contributor					Registration Number, if PAC			
Debbie Johnson	In							
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Check, etc.)		
1903 Brandywine Drive		Ta		T =	1	cash		
City	State	Zip Code	M	D	Y	Amount		
Upper Arlington	0   H	43220	1 2		$\lfloor 1 \rfloor 1$	103.29		
Full Name of Contributor			Registra	tion Nun	iber, if PA	С		
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
				,		<u> </u>		
City	State	Zip Code	M	D	Y	Amount		
-	<u> </u>							
Full Name of Contributor	Registration Number, if PAC							
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Street Address	Employer/Occup	oation/Labor Organization*	Form (Cash, Check, etc.)					
					,			
Cíty	State	Zip Code	M	D	Y	Amount		
Full Name of Contributor			Registra	ition Nun	iber, if PA	C		
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount		
Full Name of Contributor			Registra	ation Nun	nber, if PA	.C		
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
City	State	Zip Code	M <sub>.</sub>	D	Y	Amount		
				1	<u> </u>			
Full Name of Contributor			Registra	ation Nun	iber, if PA	C		
						<u> </u>		
Street Address	reet Address Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
				· · · · · ·	,			
City	State	Zip Code	M	D	Y	Amount		
		<u> </u>				<u> </u>		
Full Name of Contributor			Registra	ation Nur	nber, if PA	AC .		
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount		
Full Name of Contributor			Registr	ation Nur	nber, if PA	AC .		
treet Address Employer/Occupation/Labor Organization*			<u> </u>			Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount		
			- Annual Control of the Control of t			<u> </u>		
					4 4			

\* 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 \$ 103.29