31-A
R.C. 3517.10

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
UA Library Levy Campaign								
Full Name of Contributor							**Registration Number, if PAC**	
Elizabeth Meyers								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
2192 Sandover Rd.							PayPal Deposit	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	OH	43220	02	14	12		48.25	
Full Name of Contributor							**Registration Number, if PAC**	
Mary Ann Gilbride								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
2666 Kent Road							Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	OH	43221	02	15	12		50.00	
Full Name of Contributor							**Registration Number, if PAC**	
Brendan King								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
2805 Brandon Rd.							Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	OH	43221	02	15	12		50.00	
Full Name of Contributor							**Registration Number, if PAC**	
Megan Gilligan								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
1420 Castleton Rd. N.							Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	OH	43220	02	01	12		250.00	
Full Name of Contributor							**Registration Number, if PAC**	
Suzanne Swanson								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
1955 N. Devon Rd.							PayPal Deposit	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	OH	43212	02	23	12		23.97	
Full Name of Contributor							**Registration Number, if PAC**	
Joan Reigel								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
3354 Kirkham Rd.							Cash	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	OH	43221	02	25	12		20.00	
Full Name of Contributor							**Registration Number, if PAC**	
Deborah Hackathorn								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
2490 Middlesex Rd.							Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	OH	43221	03	03	12		100.00	
Full Name of Contributor							**Registration Number, if PAC**	
The Arlington Bank								
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**	
2130 Tremont Center							Check	
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**	
Columbus	OH	43221	03	15	12		500.00	

* 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 $ 1,042.22