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				Registro	ation Num	har if DA	C	
Anita Rios				ive Size.	auon ivum	oci, ii ra	C	
Street Address	Employer	/Oceano	ution/Labor Organization*				Form (Cash, Chec	t me \
2626 Robinwood Avenue	Limpioyer	лоссира	montabol Organization				check	κ, ειε.,
City City	Sta		Zip Code	Тм	l D	ΙΥ	Amount	
Toledo	0	H	43610	1	213		ranocat	50.00
Full Name of Contributor	•				ation Num		c	
Alice Faryna				1				
Street Address	Employer	/Occupa	tion/Labor Organization*				Form (Cash, Chec	k, etc.)
1814 Maxfield Drive							check	
City	Sta	te	Zip Code	М	D	Y	Amount	
Columbus	01	Н	43212	1 0	2 5	1 5		50.00
Full Name of Contributor				Registr	ation Num	ber, if PA	C	
Bonnie Miller Yerkes								
Street Address	Employer	/Оссира	tion/Labor Organization*	_			Form (Cash, Chec	k, etc.)
1994 Inchcliff Road							check	
City	Sta	ie	Zip Code	М	D	Y	Amount	
Columbus	01	H	43221	1 0		1 5		25.00
Full Name of Contributor				Registra	ation Num	ber, if PA	.c	-
Mary E Berger								
Street Address	Employer	/Оссира	tion/Labor Organization*				Form (Cash, Chec	k, etc.)
1845 Guilford Road							check	
City	Sta		Zip Code	M	D	Y	Amount	
Columbus	101	Н	43221	1 0		1 5		50.00
Full Name of Contributor				Registr	ation Num	ber, if PA	.C	
Lynn Friedman								
Street Address	Employer	/Occupa	tion/Labor Organization*				Form (Cash, Chec	k, etc.)
2971 White Bark Place			.				cash	
City	Sta		Zip Code	M	D	Y	Amount	• • •
Columbus	101	Н	43211	1 0		1 5		9.00
Full Name of Contributor				Registra	ation Num	ber, if PA	.C	
Richard P Gunther				<u> </u>			<u> </u>	
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Chec	k, etc.)			
40 W Stafford Avenue			10: 0 1	1	T 5	1 17	check	
City	Sta		Zip Code	M	D	Y	Amount	50.00
Worthington	01	Н	43085	110	26 ation Num	[I I]		50.00
Full Name of Contributor				Registra	ation Num	ber, ii PA		
Nicole A Spretnak Street Address	Ir1	10					Form (Cash, Chec)
2432 Southway Drive	Employer/Occupation/Labor Organization*			check	K, etc.)			
City 2432 Southway Drive	Sta	te	Zip Code	М	D	Y	Amount	
Columbus		Н	43221	1 0	1	1 5	, unount	50.00
Full Name of Contributor	10.1	- ; ,	43221					50.00
Full Name of Contributor Thomas F McIndoe								
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Chec	k, etc.)		
1211 Kenbrook Hills Drive				check				
City	Sta	ite	Zip Code	М	D	Y	Amount	
Columbus	0	Н	43220	110	1 .	115		50.00
Columbus			100	1110	1210	,	nama afsha	

* 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 \$	334.00