

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full UA Library Levy Campaign									
Full Name of Contributor James DeWille						Registration Number, if PAC			
Street Address 2580 Clairmont Ct.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Columbus	State O	H H	Zip Code 43220	M 0	D 4	Y 0	Amount 25.00		
Full Name of Contributor Jane Leach						Registration Number, if PAC			
Street Address 1236 Kenbrook Hills Dr.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Upper Arlington	State O	H H	Zip Code 43220	M 0	D 4	Y 0	Amount 100.00		
Full Name of Contributor Blair Adams						Registration Number, if PAC			
Street Address 2310 Dorset Rd.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Columbus	State O	H H	Zip Code 43221	M 0	D 4	Y 0	Amount 25.00		
Full Name of Contributor Edward Seidel						Registration Number, if PAC			
Street Address Stonehaven Dr.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Upper Arlington	State O	H H	Zip Code 43220	M 0	D 4	Y 0	Amount 100.00		
Full Name of Contributor Kelle Eubank						Registration Number, if PAC			
Street Address 2010 Upper Chelsea Rd.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Columbus	State O	H H	Zip Code 43221	M 0	D 4	Y 1	Amount 100.00		
Full Name of Contributor Pamela Bridgeport						Registration Number, if PAC			
Street Address 3691 Romnay Rd.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Upper Arlington	State O	H H	Zip Code 43221	M 0	D 4	Y 1	Amount 100.00		
Full Name of Contributor Betty T. Messenger						Registration Number, if PAC			
Street Address 2860 Rivertop Lane			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Columbus	State O	H H	Zip Code 43220	M 0	D 4	Y 1	Amount 25.00		
Full Name of Contributor Nancy M. Smith						Registration Number, if PAC			
Street Address 1670 Sussex Court			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Upper Arlington	State O	H H	Zip Code 43220	M 0	D 4	Y 1	Amount 25.00		

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 \$ 500.00