

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Royer for UA Schools							
Full Name of Contributor Thomas & Meilnda Wesfall					Registration Number, if PAC		
Street Address 1670 Doone Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43221	M 1 0	D 1 6	Y 1 5	Amount 50.00	
Full Name of Contributor Keintz Risk Management					Registration Number, if PAC		
Street Address 3040 Riverside Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43221	M 1 0	D 1 2	Y 1 5	Amount 50.00	
Full Name of Contributor Christopher & Suzzane Widing					Registration Number, if PAC		
Street Address 1251 Kenbrook Hills Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43220	M 1 0	D 1 2	Y 1 5	Amount 100.00	
Full Name of Contributor Clark & Christine Larsen					Registration Number, if PAC		
Street Address 1360 Norwell Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 1 0	D 2 1	Y 1 5	Amount 200.00	
Full Name of Contributor Joseph Scott					Registration Number, if PAC		
Street Address 35 E Livingston Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 0	D 2 0	Y 1 5	Amount 100.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

* 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)]