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							
Leach for UA Council							
Full Name of Contributor						Registration Number, if PAC	
Steven M. Andersson							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
1850 Barrington Road						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43221	04	23	15	25.00	
Full Name of Contributor						Registration Number, if PAC	
William John Shkurti							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
1877 Baldridge Road						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43221	04	24	15	250.00	
Full Name of Contributor						Registration Number, if PAC	
Kathryn B. Freiburger							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
2435 Lane Woods Drive						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43221	04	25	15	250.00	
Full Name of Contributor						Registration Number, if PAC	
Millicent M. Adams						OH 868	
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
3800 Beecham Court						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43220	04	26	15	250.00	
Full Name of Contributor						Registration Number, if PAC	
Phil S. Bradford							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
4520 Benderton Court						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43220	04	26	15	250.00	
Full Name of Contributor						Registration Number, if PAC	
Phil Glandon							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
2117 Elgin Road						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43221	04	24	15	100.00	
Full Name of Contributor						Registration Number, if PAC	
Elizabeth B. Riley							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
4732 Stonehaven Drive						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43220	04	24	15	250.00	
Full Name of Contributor						Registration Number, if PAC	
John B. Patton							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
4766 Riverside Drive						Check	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43220	04	23	15	200.00	

* 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 $ 1,575.00