Page Total \$

195.09

## **Statement of Contributions Received**

Prescribed by Secretary of State 2/01

Name of Committee in Full	<del></del>	· · · · · · · · · · · · · · · · · · ·					1	
							1	
UA Library Levy Campaign Full Name of Contributor				Registration Number, if PAC				
			Registrat	JOH HUILI	<i>J</i> CI, II I / 1			
Pay Pal	Employae/Oam	pation/Labor Organization				Form (Cash, Chec	k etc.)	
Street Address	EmployenOccii				Electr. Transf.			
2211 N. First St		17: 6 1	1	- 12	V		ransı.	
City Son Loop	C A	Zip Code 95131	1 1 1	2 3	Y 1   1	Amount	0.09	
San Jose Full Name of Contributor	CA	70101			er, if PA		0.07	
Robert Grimm			Registrat	JOH IVUILI	oci, ii i A	·C		
Street Address	Employer/Occupation/Labor Organization				Form (Cash, Chee	k etc.)		
	Employenoccu			Ī	Check			
1810 Ivanhoe Court	State:	7:- 0-1-	1 14	D	Y	Amount	-	
City	State	Zip Code	M		1	Amount	50.00	
Columbus	O   H	43220	1 1	0 2	1   1 ber, if PA		30.00	
Full Name of Contributor			Registra	HOU INUM	ber, II PA	.C		
Nancy Kincaid	Ic 1 /6			_	1	Farm (Cash Chas	di ata Y	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)		
1432 Friar Ln.		la: o i		_ <u></u>	T 02	Check		
City	State	Zip Code	M	D	Y	Amount	25.00	
Columbus	O   H	43221	1 1	0 2			25.00	
Full Name of Contributor			Registra	tion Num	ber, if PA	ic.		
James Pintar	I			_		r (0 + Cl	-14- \	
Street Address	Employer/Occu				Form (Cash, Chec	ck, etc.)		
1832 Ardleigh Rd.		<u></u>		1 5	Υ -,,	Check		
City	State	Zip Code	M	D	Y	Amount	E0.00	
Columbus	0   H	43221	1 1	0 2		<u> </u>	50.00	
Full Name of Contributor			Registra	tion Num	ber, if PA	AC .		
Paul Keith						n (0.1.0)	1	
Street Address	Employer/Occi				Form (Cash, Check, etc.)			
4424 Sussex						Check		
City	State	Zip Code	М	D	Y	Amount	35.00	
Columbus	O   H	43220	111	0 2			25.00	
tll Name of Contributor Registration Number, if PAC								
Carol Browning								
Street Address	Employer/Occi	Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)		
2307 Nottingham Rd.						Check		
City	State	Zip Code	l M	D	Y	Amount	40.00	
Columbus	O   H	43221	1 1	0 2	111		10.00	
Full Name of Contributor			Registra	tion Nun	ber, if PA	AC		
Frances Burkett								
Street Address	Employer/Occ	apation/Labor Organization				Form (Cash, Che	ck, etc.)	
1607 Elmwood Ave.					,	Check		
City	State	Zip Code	M	D	Y	Amount		
Columbus	$O \mid F$	43212	1 1		111		10.00	
Full Name of Contributor			Registra	ation Nun	iber, if P/	AC		
Pearl Hartker	<u> </u>							
Street Address	Employer/Occupation/Labor Organization				Form (Cash, Che	ck, etc.)		
3599 Prestwick Court North						Check		
City	State	Zip Code	M	Q.	Y	Amount		
Columbus	O   E	I 43220	1 1	[0]2	1 1	<u> </u>	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)