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In-Kind Contributions Received

Prescribed by Secretary of State 3/05

V				
Name of Committee in Full Leach for UA Council				
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC	
Jane Leach	Employer, Occupation, Labor Organization		Registration Num	wei, ii FAC
Street Address	Description of Item or Service		M D	Y Fair Market Value
1236 Kenbrook Hills Drive	Event postage		019 019	1
City	State Zip Code		Received at Fundraising Event?	
Upper Arlington	ОІН	43220	✓ YES	□no
Full Name of Contributor	Employer, Occup	pation, Labor Organization *	Registration Nurr	aber, if PAC
Jane Leach	1			
Street Address	Description of Item or Service		M D	Y Fair Market Value
_1236 Kenbrook Hills Drive	Event food and beverages		0 9 0 9	
City	State	Zip Code	Received at Fund	
Upper Arlington	0 H	43220	✓ YES	No
Full Name of Contributor	Employer, Occup	pation, Labor Organization *	Registration Num	ber, if PAC
Brian D. Hall		.	<u> </u>	<u> </u>
Street Address	Description of Ite		M D	Y Fair Market Value
1937 Collingwood Road	Event food and beverages			1 5 99.93
City	State	Zip Code	Received at Fund	~
Columbus	<u>lo I H</u>	43221	✓ YES	∐NO
Full Name of Contributor	Employer, Occup	pation, Labor Organization *	Registration Number, if PAC	
McTigue McGinnis & Colombo LLC	10 11 61		1 1 1 2	L v Irecuration
Street Address	Description of Item or Service		M D D 0 1 0	Y Fair Market Value 165.00
545 East Town Street	Consulting		Received at Fund	
Columbus .	State H	Zip Code 43215	YES	raising event:
Columbus Full Name of Contributor		pation, Labor Organization *	Registration Num	
Full Name of Commonds	Employer, occup	parton, caroni organization	Tregismunica rvan	
Street Address	Description of Item or Service		M D	Y Fair Market Value
			1 1 1	
City	State	Zip Code	Received at Fund	raising Event?
			YES	<u> </u>
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC	
			<u> </u>	<u> </u>
Street Address	Description of Item or Service		M D	Y Fair Market Value
	_	T		
City	State	Zip Code	Received at Fund	Iraising Event?
	 	i tal O su desde i	YES	
Full Name of Contributor	Employer, Occupation, Labor Organization •		Registration Nun	noer, if PAC
	Description of the second		M D	Y Fair Market Value
Street Address	Description of Item or Service		" "	1 Fait Starker Value
C'-	State Zip Code		Received at Fund	Iraising Event?
City	1	Zip Code	YES	No
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC	
Tail Taile of Commontain	and of the second second comments			
Street Address	Description of Item or Service		M D	Y Fair Market Value
City	State	Zip Code	Received at Fund	- —
1 · ·	1 1		YES	No

^{*} 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))