31-A
R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full						
Everyone for Ed Leonard						
Full Name of Contributor					**Registration Number, if PAC**	
R K Kerns						
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**
1902 Lake Shore Dr						Check
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**
Columbus	OH	43204	07	21	14	1,000.00
Full Name of Contributor					**Registration Number, if PAC**	
Andrew Showe						
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**
45 N Fourth St, Ste 250						Check
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**
Columbus	OH	43215	07	21	14	500.00
Full Name of Contributor					**Registration Number, if PAC**	
Edward Brown						
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**
125 E Redbud Aly						Check
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**
Columbus	OH	43206	10	04	14	2,000.00
Full Name of Contributor					**Registration Number, if PAC**	
Marlene E. Lynn						
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**
203 Windsor Ct, Apt H						Check
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**
Marysville	OH	43040	11	24	14	25.00
Full Name of Contributor					**Registration Number, if PAC**	
Marilyn Messina/Marilyn Messina LLC						
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**
1266 Primrose Pl						Check
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**
Columbus	OH	43212	11	24	14	200.00
Full Name of Contributor					**Registration Number, if PAC**	
Laurence G Ruben						
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**
140 S Columbia Ave						Check
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**
Bexley	OH	43209	11	24	14	250.00
Full Name of Contributor					**Registration Number, if PAC**	
Don Casto/Casto Partners LLC						
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**
250 Civic Center Drive, Suite 500						Check
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**
Columbus	OH	43215	11	24	14	500.00
Full Name of Contributor					**Registration Number, if PAC**	
Brett Kaufman/Kaufman Communities LLC						
Street Address	**Employer/Occupation/Labor Organization***					**Form (Cash, Check, etc.)**
30 Warren Street						Check
City	**State**	**Zip Code**	**M**	**D**	**Y**	**Amount**
Columbus	OH	43215	11	24	14	250.00

* 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 $ 4,725.00