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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full								
4								
UA Library Levy Campaign Full Name of Contributor			<del></del>	Panister	tion Mum	ber, if PA	·C	
				registra	con tenn	oci, ii i M		
Pav Pal Street Address	Employe	riOoour.	ation/Labor Organization*				Form (Cash, Chec	k etc.)
	Employer	, occupa	montation Organization:				Elect. Tra	
2211 N. First St.	Sta	114	Zip Code	M	D	ΙΥ	Amount	11151.
City San Jose	C	A	95131	$\begin{vmatrix} \stackrel{\wedge}{1} \end{vmatrix}_1$	213	111	- AIRRIN	0.09
Full Name of Contributor			75151			ber, if PA	VC	0.07
Robert Grimm				registre				
Street Address	Employe	/Occura	ation/Labor Organization*				Form (Cash, Chec	k. etc.)
1810 Ivanhoe Court	,						Check	•
City	Sta	ite	Zip Code	М	D	Y	Amount	
Columbus		H	43220	1 1	012	111	1	50.00
Full Name of Contributor	101	=	10220		_	ber, if PA	AC	20.00
Nancy Kincaid				1				
Street Address	Employer	/Occupa	ation/Labor Organization*				Form (Cash, Chec	k, etc.)
1432 Friar Ln.	Employer Occupation East of Emilianion			Check				
City	Sta	ite	Zip Code	М	D	Y	Amount	
Columbus	0 1	Н	43221	1 1	012	111		25.00
Full Name of Contributor	, ,		10441			ber, if PA	VC	
James Pintar								
Street Address	Employe	r/Occupa	ation/Labor Organization*	<u> </u>			Form (Cash, Chec	k, etc.)
1832 Ardleigh Rd.		•					Check	
City	Sta	ate	Zip Code	M	D	Y	Amount	
Columbus		Н	43221	1111	012	1 1	!	50.00
Full Name of Contributor			·			ber, if PA	NC .	
Paul Keith								
Street Address	Employe	r/Occupa	ation/Labor Organization*				Form (Cash, Chec	k, etc.)
4424 Sussex							Check	
City	Sta	ate	Zip Code	М	D	Y	Amount	
Columbus		Н	43220	111	012	111		25.00
Full Name of Contributor				Registra	tion Num	ber, if PA	AC .	
Carol Browning								
Street Address	Employe	r/Occup	ation/Labor Organization*				Form (Cash, Chec	k, etc.)
2307 Nottingham Rd.							Check	
City	Sta		Zip Code	M	Ð	Y	Атоши	
Columbus		Н	43221	111	012	111		10.00
Full Name of Contributor				Registra	tion Num	ber, if PA	AC	
Frances Burkett								
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)				
1607 Elmwood Ave.							Check	
City	St	ate	Zip Code	M	D	Y	Amount	40.00
Columbus	0	H	43212	111	0 2		<u> </u>	10.00
Full Name of Contributor Registration Number, if PAC								
Pearl Hartker								
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)				
3599 Prestwick Court North						,	Check	
City	Şı	ate	Zip Code	M	D	Y	Amount	2= 00
Columbus	O	Н	43220	111	0 2	111	<u> </u>	25.00

Page Total \$	195.09

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)]