

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Leach for UA Council							
Full Name of Contributor D. Wesley Newhouse					Registration Number, if PAC		
Street Address 2674 Henthorne Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43221	M 0 6	D 1 3	Y 1 1	Amount 100.00	
Full Name of Contributor John M. Adams, Jr.					Registration Number, if PAC		
Street Address 3800 Beecham Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 0 6	D 1 8	Y 1 1	Amount 100.00	
Full Name of Contributor Deborah P. Bower					Registration Number, if PAC		
Street Address 1361 Fountaine Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 6	D 2 2	Y 1 1	Amount 50.00	
Full Name of Contributor Charles W. Groezinger					Registration Number, if PAC		
Street Address 2193 Shoreham Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 0 6	D 1 8	Y 1 1	Amount 25.00	
Full Name of Contributor Timothy L. King					Registration Number, if PAC		
Street Address 4300 Waybourn Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 0 6	D 2 0	Y 1 1	Amount 50.00	
Full Name of Contributor Mary Ann Krauss					Registration Number, if PAC		
Street Address 1980 Upper Chelsea Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43221	M 0 6	D 1 5	Y 1 1	Amount 250.00	
Full Name of Contributor Katherine R. Leffler					Registration Number, if PAC		
Street Address 2230 Northam Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 6	D 1 8	Y 1 1	Amount 40.00	
Full Name of Contributor Thomas L. Long					Registration Number, if PAC		
Street Address 2565 Leeds Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 6	D 1 8	Y 1 1	Amount 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 \$ **865.00**