

FILED

Ohio Campaign Finance Report

APR 23 AM 10:43

Prescribed by Secretary of State 3/05

FRANKLIN COUNTY
BOARD OF ELECTIONS

Full Name of Committee UA Library Levy Campaign							Registration Number, if PAC		
Full Name of Candidate									
Street Address 1810 North Devon Road						Office Sought		District	
City Columbus						State O H		Zip Code 43212	
Type of Report (place X to the left of report type)	<input checked="" type="checkbox"/>	Pre-Primary		Post-Primary		Pre-General		Post-General	Annual Year
		July Monthly		August Monthly		September Monthly		Termination	Semiannual
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Report Electronically filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Date of Election		M	D	Y	
						0	5	0	5
						0	5	0	9

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box. No other forms are required at a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$	0.00
2. Total monetary contributions (From Form No. 31-A)	\$	16,990.75
3. Total other income (From Form No. 31-A-2)	\$	0.00
4. Total funds available (sum of lines 1, 2, 3)	\$	16,990.75
5. Total monetary expenditures (From Form No. 31-B)	\$	3,899.50
6. Balance on hand (line 4 minus line 5)	\$	13,091.25
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	0.00
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	0.00
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	0.00
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	0.00
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	0.00
12. Value of independent expenditures made (From Form No. 31-U)	\$	
13. For Electronic Filing Entities only	\$	
Sum of lines 2, 7 and amount of any new loans received this period	\$	

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE

Sylvia L. Gillis, Treasurer

Print Name and Title (Treasurer and Deputy Treasurer only)

Signature

Sylvia L. Gillis

Apr 23, 2009

Date

Contribution pages 11

Expenditure pages 1

Other pages 1

Total pages 13

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full UA Library Levy Campaign							
Full Name of Contributor UA Library Foundation					Registration Number, if PAC		
Street Address 2800 Tremont Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington		State O H	Zip Code 43221	M 0 3	D 0 4	Y 0 9	Amount 10,000.00
Full Name of Contributor Amy Sharpe					Registration Number, if PAC		
Street Address 2358 Northwest Blvd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington		State O H	Zip Code 43221	M 0 3	D 0 9	Y 0 9	Amount 250.00
Full Name of Contributor Sylvia Gillis					Registration Number, if PAC		
Street Address 1810 N. Devon Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington		State O H	Zip Code 43212	M 0 3	D 0 9	Y 0 9	Amount 50.00
Full Name of Contributor Ruth O'Neill					Registration Number, if PAC		
Street Address 6118 Gioffe Woods Ln.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43223	M 0 3	D 1 1	Y 0 9	Amount 50.00
Full Name of Contributor Ann Moore					Registration Number, if PAC		
Street Address 4951 Wallington Dr.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Hilliard		State O H	Zip Code 43026	M 0 3	D 1 3	Y 0 9	Amount 200.00
Full Name of Contributor Friends of the UA Library					Registration Number, if PAC		
Street Address 2800 Tremont Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington		State O H	Zip Code 43221	M 0 3	D 1 4	Y 0 9	Amount 3,500.00
Full Name of Contributor Lea Dukat					Registration Number, if PAC		
Street Address 1311 Smallwood			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Cash	
City Columbus		State O H	Zip Code 43235	M 0 3	D 1 6	Y 0 9	Amount 0.75
Full Name of Contributor Ruth Abrams					Registration Number, if PAC		
Street Address 1205 Kenbrook Hills Dr.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43220	M 0 3	D 2 7	Y 0 9	Amount 50.00

* 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)

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full UA Library Levy Campaign							
Full Name of Contributor Chadwick Alger						Registration Number, if PAC	
Street Address 2674 Westmont Blvd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 25.00
Full Name of Contributor Joyce Allen						Registration Number, if PAC	
Street Address 2494 Abinton Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington		State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 20.00
Full Name of Contributor Toni Auch						Registration Number, if PAC	
Street Address 1411 Fountain Dr.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 25.00
Full Name of Contributor Errol Bueche						Registration Number, if PAC	
Street Address 1465 Westminster Dr.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 20.00
Full Name of Contributor Shirley Christensen						Registration Number, if PAC	
Street Address 2200 Middlesex Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43220	M 0 3	D 2 7	Y 0 9	Amount 25.00
Full Name of Contributor Joe Cofer						Registration Number, if PAC	
Street Address 1564 Barrington Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 50.00
Full Name of Contributor Ida Copenhaver						Registration Number, if PAC	
Street Address 2448 Edington Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 30.00
Full Name of Contributor Iris De la Motte						Registration Number, if PAC	
Street Address 4130 Oxford Dr.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43220	M 0 3	D 2 7	Y 0 9	Amount 10.00

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Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full UA Library Levy Campaign						
Full Name of Contributor Eileen Dobias					Registration Number, if PAC	
Street Address 2260 Buckley Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43220	M 0 3	D 2 7	Y 0 9	Amount 25.00
Full Name of Contributor Walter Ersing					Registration Number, if PAC	
Street Address 2230 Swansea Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 20.00
Full Name of Contributor Marion Folkerth					Registration Number, if PAC	
Street Address 2027 Andover Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43212	M 0 3	D 2 7	Y 0 9	Amount 50.00
Full Name of Contributor Patricia Furney					Registration Number, if PAC	
Street Address 2729 Zollinger Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 25.00
Full Name of Contributor Steven Glass					Registration Number, if PAC	
Street Address 1817Inchcliff Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 30.00
Full Name of Contributor Ken Guillory					Registration Number, if PAC	
Street Address 3836 Patricia Dr.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43220	M 0 3	D 2 7	Y 0 9	Amount 20.00
Full Name of Contributor Jo Ann Hall					Registration Number, if PAC	
Street Address 3880 Woodbridge Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43220	M 0 3	D 2 7	Y 0 9	Amount 25.00
Full Name of Contributor Richard Harned					Registration Number, if PAC	
Street Address 2723 Brandon Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 20.00

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Name of Committee in Full UA Library Levy Campaign							
Full Name of Contributor Joyce Healy					Registration Number, if PAC		
Street Address 2098 Ellington Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 10.00
Full Name of Contributor Gloria Heydlauff					Registration Number, if PAC		
Street Address 2390 Sherringham Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington		State O H	Zip Code 43220	M 0 3	D 2 7	Y 0 9	Amount 100.00
Full Name of Contributor Alene Hinshaw					Registration Number, if PAC		
Street Address 1573 Kirkley Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 40.00
Full Name of Contributor Dr. Marilyn G. Hood					Registration Number, if PAC		
Street Address 3310 Somerford Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 20.00
Full Name of Contributor Joan Howison					Registration Number, if PAC		
Street Address 2715 River Park Dr.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43220	M 0 3	D 2 7	Y 0 9	Amount 25.00
Full Name of Contributor Jeanine Hummer					Registration Number, if PAC		
Street Address 1295 Edgemont Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington		State O H	Zip Code 43212	M 0 3	D 2 7	Y 0 9	Amount 25.00
Full Name of Contributor Deborah Johnson					Registration Number, if PAC		
Street Address 1903 Brandywine Dr.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus		State O H	Zip Code 43220	M 0 3	D 2 7	Y 0 9	Amount 50.00
Full Name of Contributor David C. Jones					Registration Number, if PAC		
Street Address 2665 Woodstock Rd.			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington		State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 20.00

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Statement of Contributions Received

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Name of Committee in Full UA Library Levy Campaign							Registration Number, if PAC					
Full Name of Contributor Maureen Lewis				Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check					
Street Address 2240 McCoy Rd.				City Columbus			State O H		Zip Code 43220			
				M		D		Y		Amount 25.00		
				0 3		2 7		0 9				
Full Name of Contributor John E. Makris							Registration Number, if PAC					
Street Address 1820 Lane Rd.				Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Cash					
City Columbus				State O H		Zip Code 43220		M 0 3		D 2 7	Y 0 9	Amount 20.00
Full Name of Contributor Lenore Mastracci							Registration Number, if PAC					
Street Address 1826 Westwood Ave.				Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check					
City Upper Arlington				State O H		Zip Code 43212		M 0 3		D 2 7	Y 0 9	Amount 20.00
Full Name of Contributor Charles M. Moffitt							Registration Number, if PAC					
Street Address 2623 Bristol Rd.				Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check					
City Columbus				State O H		Zip Code 43221		M 0 3		D 2 7	Y 0 9	Amount 10.00
Full Name of Contributor Reginald Rahn							Registration Number, if PAC					
Street Address 2135 Sandeston Rd.				Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check					
City Columbus				State O H		Zip Code 43220		M 0 3		D 2 7	Y 0 9	Amount 25.00
Full Name of Contributor Walter R. Rhodes							Registration Number, if PAC					
Street Address 1768 Quarry View				Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check					
City Columbus				State O H		Zip Code 43204		M 0 3		D 2 7	Y 0 9	Amount 10.00
Full Name of Contributor Kari Rucker							Registration Number, if PAC					
Street Address 1624 Barrington Rd.				Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check					
City Upper Arlington				State O H		Zip Code 43221		M 0 3		D 2 7	Y 0 9	Amount 10.00
Full Name of Contributor Lenere Shrieves							Registration Number, if PAC					
Street Address 2728 Mt. Holyoke Rd.				Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Cash					
City Columbus				State O H		Zip Code 43221		M 0 3		D 2 7	Y 0 9	Amount 5.00

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Statement of Contributions Received

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Name of Committee in Full UA Library Levy Campaign						
Full Name of Contributor Charlotte Smith				Registration Number, if PAC		
Street Address 1802 Riverside Dr. Apt. 1130		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43212	M 0 3	D 2 7	Y 0 9	Amount 25.00
Full Name of Contributor Jeff Stevenson				Registration Number, if PAC		
Street Address 1817 Lynnhaven Dr.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 10.00
Full Name of Contributor Dr. Ernest Svensson				Registration Number, if PAC		
Street Address 4533 Kipling Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43220	M 0 3	D 2 7	Y 0 9	Amount 25.00
Full Name of Contributor H. Lewis Ullman				Registration Number, if PAC		
Street Address 1536 College Hill Dr.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 3	D 2 7	Y 0 9	Amount 10.00
Full Name of Contributor Nathan Hanson				Registration Number, if PAC		
Street Address 3477 Sciotaly Dr.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 3	D 3 0	Y 0 9	Amount 25.00
Full Name of Contributor Jane Ellis				Registration Number, if PAC		
Street Address 2291 Walhaven Ct.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington	State O H	Zip Code 43220	M 0 3	D 3 1	Y 0 9	Amount 50.00
Full Name of Contributor Sarah Magill				Registration Number, if PAC		
Street Address 2756 Andover Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 3	D 3 1	Y 0 9	Amount 50.00
Full Name of Contributor Estelle Scott				Registration Number, if PAC		
Street Address 1553 Fishinger Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 3	D 3 1	Y 0 9	Amount 25.00

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Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full UA Library Levy Campaign						
Full Name of Contributor Ted Bieber				Registration Number, if PAC		
Street Address 2722 Woodstock Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 4	D 0 1	Y 0 9	Amount 50.00
Full Name of Contributor Don Cook				Registration Number, if PAC		
Street Address 2585 Canterbury Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 4	D 0 1	Y 0 9	Amount 25.00
Full Name of Contributor Susan Eisenman				Registration Number, if PAC		
Street Address 3363 Tremont		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 4	D 0 1	Y 0 9	Amount 25.00
Full Name of Contributor Dan Jones				Registration Number, if PAC		
Street Address 2726 Wexford Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 4	D 0 1	Y 0 9	Amount 25.00
Full Name of Contributor Joan Mast				Registration Number, if PAC		
Street Address 2733 Wickliffe Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington	State O H	Zip Code 43221	M 0 4	D 0 1	Y 0 9	Amount 25.00
Full Name of Contributor Chip Motil				Registration Number, if PAC		
Street Address 2770 Elginfield Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43220	M 0 4	D 0 1	Y 0 9	Amount 100.00
Full Name of Contributor Clark Pritchett				Registration Number, if PAC		
Street Address 4185 Chadbourne Dr.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43220	M 0 4	D 0 1	Y 0 9	Amount 50.00
Full Name of Contributor Brent Taggart				Registration Number, if PAC		
Street Address 2069 Fairfax Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington	State O H	Zip Code 43221	M 0 4	D 0 1	Y 0 9	Amount 50.00

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Statement of Contributions Received

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Name of Committee in Full UA Library Levy Campaign							
Full Name of Contributor John Corrigan					Registration Number, if PAC		
Street Address 2853 Wickliffe		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 4	D 0 2	Y 0 9	Amount 50.00	
Full Name of Contributor Ruth Gerstner					Registration Number, if PAC		
Street Address 1983 Suffolk Rd		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43221	M 0 4	D 0 2	Y 0 9	Amount 50.00	
Full Name of Contributor Gail Havener					Registration Number, if PAC		
Street Address 3828 Norbrook Dr.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43220	M 0 4	D 0 2	Y 0 9	Amount 25.00	
Full Name of Contributor Loretta Heigle					Registration Number, if PAC		
Street Address 2376 Southway Dr.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 4	D 0 2	Y 0 9	Amount 50.00	
Full Name of Contributor Susan Oppenheimer					Registration Number, if PAC		
Street Address 1576 Grenoble Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 4	D 0 2	Y 0 9	Amount 25.00	
Full Name of Contributor Thomas C. Hayward					Registration Number, if PAC		
Street Address 2554 Zollinger Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43221	M 0 4	D 0 3	Y 0 9	Amount 25.00	
Full Name of Contributor Linda Mauger					Registration Number, if PAC		
Street Address 2043 N. Devon Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43212	M 0 4	D 0 3	Y 0 9	Amount 50.00	
Full Name of Contributor Matthew E. Shad					Registration Number, if PAC		
Street Address 143 Kossuth St.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43206	M 0 4	D 0 4	Y 0 9	Amount 100.00	

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Name of Committee in Full UA Library Levy Campaign						
Full Name of Contributor James DeWille				Registration Number, if PAC		
Street Address 2580 Clairmont Ct.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43220	M 0 4	D 0 6	Y 0 9	Amount 25.00
Full Name of Contributor Jane Leach				Registration Number, if PAC		
Street Address 1236 Kenbrook Hills Dr.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington	State O H	Zip Code 43220	M 0 4	D 0 6	Y 0 9	Amount 100.00
Full Name of Contributor Blair Adams				Registration Number, if PAC		
Street Address 2310 Dorset Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 4	D 0 8	Y 0 9	Amount 25.00
Full Name of Contributor Edward Seidel				Registration Number, if PAC		
Street Address Stonehaven Dr.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington	State O H	Zip Code 43220	M 0 4	D 0 8	Y 0 9	Amount 100.00
Full Name of Contributor Kelle Eubank				Registration Number, if PAC		
Street Address 2010 Upper Chelsea Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 4	D 1 0	Y 0 9	Amount 100.00
Full Name of Contributor Pamela Bridgeport				Registration Number, if PAC		
Street Address 3691 Romnay Rd.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington	State O H	Zip Code 43221	M 0 4	D 1 1	Y 0 9	Amount 100.00
Full Name of Contributor Betty T. Messenger				Registration Number, if PAC		
Street Address 2860 Rivertop Lane		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43220	M 0 4	D 1 1	Y 0 9	Amount 25.00
Full Name of Contributor Nancy M. Smith				Registration Number, if PAC		
Street Address 1670 Sussex Court		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Upper Arlington	State O H	Zip Code 43220	M 0 4	D 1 1	Y 0 9	Amount 25.00

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Statement of Contributions Received

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Name of Committee in Full UA Library Levy Campaign									
Full Name of Contributor Jack Burtch						Registration Number, if PAC			
Street Address 1959 W. Lane Ave.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43221		M 0 4	D 1 4	Y 0 9	Amount 150.00
Full Name of Contributor Jane Vollrath						Registration Number, if PAC			
Street Address 1007 Norway Dr.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43220		M 0 3	D 2 7	Y 0 9	Amount 50.00
Full Name of Contributor Elizabeth G. Weadlock						Registration Number, if PAC			
Street Address 1805 Guilford Rd.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Upper Arlington		State O H		Zip Code 43221		M 0 4	D 0 9	Y 0 9	Amount 25.00
Full Name of Contributor Dean Williams						Registration Number, if PAC			
Street Address 2302 Haviland Rd.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43220		M 0 3	D 2 7	Y 0 9	Amount 25.00
Full Name of Contributor Erik F. Yassenoff						Registration Number, if PAC			
Street Address 2260 Swansea Rd.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Upper Arlington		State O H		Zip Code 43221		M 0 4	D 0 3	Y 0 9	Amount 250.00
Full Name of Contributor Charlotte Yates						Registration Number, if PAC			
Street Address 4364 Airendel Ct.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43220		M 0 3	D 2 7	Y 0 9	Amount 15.00
Full Name of Contributor Susan Yutzey						Registration Number, if PAC			
Street Address 1254 Norwell Dr.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43220		M 0 3	D 3 1	Y 0 9	Amount 50.00
Full Name of Contributor Suebeth D. Zartman						Registration Number, if PAC			
Street Address 2648 Swansea Rd.			Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) Check		
City Upper Arlington		State O H		Zip Code 43221		M 0 3	D 2 7	Y 0 9	Amount 20.00

* 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)

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full UA Library Levy Campaign						
Full Name of Contributor Margaret Zidonsi				Registration Number, if PAC		
Street Address 1724 Churchview Lane		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43220	M 0 3	D 2 7	Y 0 9	Amount 25.00
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount

* 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)

Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full UA Library Levy Campaign							
To Whom Paid ThisWeek Community Newspaper				M	D	Y	Amount
				0	4	1	0
				0	9	0	1,155.00
Address 7801 N. Central Dr., P.O. Box 608		Purpose Ads in the Upper Arlington Paper for three weeks					
City Lewis Center		State O	H	Zip Code 43035	Check Number 1027		
To Whom Paid Bricker & Eckler LLP				M	D	Y	Amount
				0	3	3	1
				0	9	0	1,144.50
Address 100 S. Third St.		Purpose Postage to mail campaign information 2725 @ .42 cents					
City Columbus		State O	H	Zip Code 43215	Check Number 1028		
To Whom Paid Suburban News Publications				M	D	Y	Amount
				0	3	3	1
				0	9	0	1,600.00
Address 5257 Sinclair Rd., P.O. Box 29912		Purpose Ads in Support of UA Library Levy to run for five weeks					
City Columbus		State O	H	Zip Code 43229	Check Number 1026		
To Whom Paid				M	D	Y	Amount
Address							
City		State	Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address							
City		State	Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address							
City		State	Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address							
City		State	Zip Code	Check Number			
To Whom Paid				M	D	Y	Amount
Address							
City		State	Zip Code	Check Number			