31-A
R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Leach for UA Council							
Full Name of Contributor						**Registration Number, if PAC**	
James C. Manning							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
1841 Suffolk Road							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Upper Arlington	OH	43221	08	31	15		50.00
Full Name of Contributor						**Registration Number, if PAC**	
Kent E. Studebaker							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
1492 Roxbury Road							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Marble Cliff	OH	43212	09	01	15		250.00
Full Name of Contributor						**Registration Number, if PAC**	
Frank Schuckmann							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
650 Glastonbury Court							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Westerville	OH	43081	09	10	15		25.00
Full Name of Contributor						**Registration Number, if PAC**	
John Jolley							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
191 W. Nationwide Blvd., Ste. 300							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43215	09	10	15		50.00
Full Name of Contributor						**Registration Number, if PAC**	
Susan E. Ashbrook							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
2994 Crescent Drive							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43204	09	08	15		150.00
Full Name of Contributor						**Registration Number, if PAC**	
Greg J. Davies							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
2646 Brandon Road							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43221	09	05	15		200.00
Full Name of Contributor						**Registration Number, if PAC**	
Mark A. Hummer							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
1795 Edgemont Road							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43212	09	10	15		100.00
Full Name of Contributor						**Registration Number, if PAC**	
Charles R. Santer							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
221 W. Hubbard Avenue							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43215	09	09	15		100.00

* 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 $ 925.00