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Statement of Contributions Received

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Page	1	
		

Prescribed by Secretary of State 03/05

Name of Committee in Full								
DEEDS FOR COUNCIL					1 '0-			
Full Name of Contributor MAY ALACY TO			Registrat	non Nun	iber, if PA	AC :		
MIKE WALKER Street Address	Employer/Occurs	ation/Labor Organization				Form (Cash, Check, etc.)		
184 KRAMER ST. City CANAL WINKHESTER Full Name of Contributor	Employer/Occupation/Labor Organization				CABU			
City	State	Zip Code 43110	M	27	, I	Amount /00°		
Full Name of Contributor	UH	73110			f 1 nber, if P/			
PLCKY L. DEEDS Street Address			Кедізпа	uon nun	ibei, ii rz			
Street Address	Employer/Occup			Form (Cash, Check, etc.)				
				CASH				
City	State	Zip Code	M	D	Y	Amount		
7302 CROSSETT CINY CANAL WINCHESTER	104	43110				16729		
Full Name of Contributor Registration Number, if PAC								
Street Address Employer/Occupation/Labor Organization						Form (Cash, Check, etc.)		
	<u> </u>	<u> </u>	1	1 -5-	1 1/	\		
City	State	Zip Code	M	D		Amount		
Full Name of Contributor			Registra	tion Nun	nber, if P	AC		
reet Address Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
City	State	Zip Code	M	D	Y	Amount		
					1			
Full Name of Contributor			Kegistra	tion Nur	nber, if P	AC		
Street Address	Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
		··			1			
City	State	Zip Code	M	D	Y	Amount		
Full Name of Contributor			Registra	tion Nur	nber, if P.	AC		
The training of Controlled								
Street Address	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.				
City	State	Zip Code	M	D	Y	Amount		
Full Name of Contributor			Registra	tion Nu	nber, if P	AC		
Tan trance of Continued								
Street Address	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)				
City	State	Zip Code	М	D	Y	Amount		
Full Name of Contributor Registration Number, if P						AC		
Street Address	Employer/Occupation/Labor Organization					Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount		

Page Total \$ 26729

^{*} 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 also appear. [R.C. 3517.10(B)(4)]