

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Walsh For Bexley									
Full Name of Contributor Suellen Bennett						Registration Number, if PAC			
Street Address 828 Vernon Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Anedot		
City Columbus			State OH		Zip Code 43209		M D Y 1 1 0 8 1 7		Amount \$30.00
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
OH									
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
OH									
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
OH									
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City			State		Zip Code		M D Y		Amount
OH									

* 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)]

Page Total **\$30.00**