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Page 3	_

## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

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Name of Committee in Full								
DOUG JOSEPH ELECTION FUND								
Full Name of Contributor					Registration Number, if PAC			
WILLIAM SCHUCK Street Address	TE 1	10						
	Employe	r/Occupa	ation/Labor Organization*				Form (Cash, Check, etc.)	
1322 LANCASTER AVE.			T			,	CHECK	
city REYNOLDSBURG	O	ate H	Zip Code 43068	M	D 1   E	Y	Amount	
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Full Name of Contributor			Registration Number, if PAC					
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Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
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Full Name of Contributor Registration Number, if						aber, if PA	C	
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City	Sta	ate	Zip Code	М	D	Y	Amount	
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Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
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City	Sta	ate 	Zip Code	M	D	Y	Amount	
Edl North Contribution				Danistas	tian Non	-b GDA		
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City	Sta	ate	Zip Code	М	D	Y	Amount	
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Full Name of Contributor			* · · · · · · · · · · · · · · · · · · ·	Registra	tion Nur	nber, if PA	С	
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
City	Sta	ate	Zip Code	М	D	Y	Amount	

Page Total \$ 40.00

<sup>\*</sup> 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)]