

Statement of Contributions Received

Prescribed by Secretary of State 8/95

Name of Committee in Full <i>Laborers' Intl Union of N.A., Local 423 PAC Fund</i>		Registration Number, if PAC <i>LA 912</i>	
Full Name of Contributor <i>Ballard Stiltner</i>		Form (Cash, Check, etc.)	
Street Address <i>3929 Cloverdale Rd</i>	Employer/Occupation/Labor Organization*		
City <i>Medway</i>	State <i>OH</i>	Zip Code <i>45341</i>	Amount <i>75.00</i>
Full Name of Contributor		Registration Number, if PAC	
Street Address		Form (Cash, Check, etc.)	
City	State	Zip Code	Amount
Full Name of Contributor		Registration Number, if PAC	
Street Address		Form (Cash, Check, etc.)	
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Street Address		Form (Cash, Check, etc.)	
City	State	Zip Code	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 donate 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 \$ *75.00*