## **Statement of Contributions Received**

Page 3

Prescribed by Secretary of State 03/05

Name of Committee in Full A. Troy Miller for Columbus	er manufannum et til fill til statistisk grapp grap år se gap år staddskap de kje ster pop gran år stadde de d				
Full Name of Contributor  Contributions from form No. 31-E			Registration Number, if	PAC	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	0 6 2 5 0 9	Amount \$4,334.96	
Full Name of Contributor			Registration Number, if	PAC	
Contributions from form No. 31-E	F1/000	**************************************	<u> </u>	Form (Cash, Check, etc.)	
Street Address	Employer/Occupation/Labor Organization*				
City	State OH	Zip Code	0 8 2 7 0 9	Amount \$129.96	
Full Name of Contributor  Contributions from form No. 31-E			Registration Number, if	PAC	
Street Address	Employer/Occi	upation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	0 9 2 2 0 9	Amount \$650.00	
Full Name of Contributor  Contributions from form No. 31-E			Registration Number, if	PAC	
Street Address	Employer/Occ	upation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code		Amount \$3,315.00	
Full Name of Contributor			Registration Number, if	PAC	
Street Address	Employer/Occ	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	M D Y	Amount	
Full Name of Contributor			Registration Number, i	FPAC	
Street Address	Employer/Occ	cupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	M D Y	Amount	
Full Name of Contributor			Registration Number, i	Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State OH	Zip Code	M D Y	Amount	
Full Name of Contributor		1	Registration Number,	if PAC	
Street Address	Employer/Oc	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.	
City	State OH	Zip Code	M D Y	Amount	

Page Total \$8,429.92

<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 also appear. [R.C. 3517.10(B)(4)]