

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Laborers' International Union of North America Local 423 PAC Fund									
Full Name of Contributor Thomas Kaiser						Registration Number, if PAC LA912			
Street Address 12826 Longbranch			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) 75.00		
City Moores Hill	State IN	Zip Code 47032	M 09	D 11	Y 09	Amount 75.00			
Full Name of Contributor James Halliue						Registration Number, if PAC LA912			
Street Address PO Box 688			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City Grayson	State KY	Zip Code 41143	M 09	D 01	Y 09	Amount 75.00			
Full Name of Contributor Glenius Brown						Registration Number, if PAC LA912			
Street Address 2256 Glenbrook			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City Columbus	State OH	Zip Code 43232	M 08	D 25	Y 09	Amount 75.00			
Full Name of Contributor Daniel Husband						Registration Number, if PAC LA912			
Street Address 2597 Blue Rock			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City Hove City	State OH	Zip Code 43103	M 09	D 02	Y 09	Amount 75.00			
Full Name of Contributor Gregory Caver						Registration Number, if PAC LA912			
Street Address 45 Maine St Rt 4			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City Ashland	State OH	Zip Code 44805	M	D	Y	Amount 75.00			
Full Name of Contributor Jeremiah Marshall						Registration Number, if PAC LA912			
Street Address 4396 Westport			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City Vols	State OH	Zip Code	M 08	D 10	Y 09	Amount 75.00			
Full Name of Contributor Rafael Salas						Registration Number, if PAC LA912			
Street Address 571 Plaza Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City Circleville	State OH	Zip Code 43113	M 08	D 06	Y 09	Amount 25.00			
Full Name of Contributor Terence Smith						Registration Number, if PAC LA912			
Street Address 231 Syckew Rd #			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City Mt. Vernon	State OH	Zip Code	M 09	D 25	Y 09	Amount 25.00			

* 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)]

Page Total \$ 500.00