

Statement of Contributions Received

Prescribed by Secretary of State 3/05

			(Albanian bankara)			
Name of Committee in Full Support LaCorte Caudai an						
Full Name of Contributor Registration Number, if PAC Registration Number, if PAC						
Street Address WRIGHT Park	Employer/Occi	pation/Labor Organization*				Form (Cash, Check, etc.)
City Whitehall	State	Zip Code 43213	М	D	Y	Amount 40 00
Full Name of Contributor Registration Number, if PA						AC .
Street Address 50 lel Emark	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City Whitchall	State	Zip Code	М	D	Y	Amount 50°°
Full Name of Contributor	Registration Number, if Pa					.C
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor			Registr	ation Nun	ber, if PA	C
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Amount
Full Name of Contributor Registration Number, if PA						C
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Amount
Full Name of Contributor	Registration Number, if PA					C
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
City	State	Zip Code	М	D	Y	Amount
Full Name of Contributor Registration Number, if					ber, if PA	C
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Amount
Full Name of Contributor Registration Number, if PA						C
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Amount
ruited for contributions from individuals over \$100 to statewide and con-	<u> </u>					

* 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 \$ 0.00