Statement of Contributions Received

Prescribed by Secretary of State 8/95

							_		_	
Name of Committee in Full Committee to ReEket Ame Hatman Pater to Bextey City Cancel Full Name of Contributor Anna Hettman Pater Street Address Lb Scsscrs Dira Cash City Columbus Columbus Form (Cash, Check, etc.) State Columbus Registration Number, if PAC Registration Number, if PAC										
Full Name of Contributor										
Anne Hellman Poter										
Street Address	Employe						Form (Cash, Check, etc.)			
16 Sessions Dive	realter									Cash
City	Sta	ite 1 L	Zip Code		1		,	Y	؍ ا	Amount 5. W
(chumbus	\mathcal{O}	17	4 240	Rec	ristra	rion N	lus.	her	ďΡ,). (U)
Full Name of Contributor Registration Number, if PAC										
Street Address	Employer/Occupation/Labor Organization*							_	Form (Cash, Check, etc.)	
Officer Vitaliess										
City	Sta	ue	Zip Code	N	ſ	D		Y		Amount
•		<u></u>								
Full Name of Contributor Registration Number, if PAC										
Form (Cash, Check, etc.)										
Street Address	Employer/Occupation/Labor Organization*									i orin (Cusii, Cheek, eic.)
Civ.	Sta	nte	Zip Code	1 2	1	D		Y	-	Amount
City		_	•							
Full Name of Contributor Registration Number, if PAC										AC
Street Address	Employe							Form (Cash, Check, etc.)		
City	Sta	arc .	Zip Code	A	1	D		Y		Amount
	Registration Number, if P								AC.	
Full Name of Contributor Registration Number, it PAC										
Street Address	Employer/Occupation/Labor Organization*								Form (Cash, Check, etc.)	
unce records										
City	St	nie e	Zip Code	X	1	D		Y		Amount
_										
Full Name of Contributor				Re	gistra	tion l	Yun	nber,	if P	AC
									E	
Street Address Employer/Occupation/Labor Organization* Form								Form (Cash, Check, etc.)		
a.	e,	ate	Zip Code	1.3	fi .	D.		ΥÌ		Amount
City	31		Sip Como	"	-					
Full Name of Contributor		<u> </u>		Re	gistra	tion t	vun	ıber,	if P	WC .
Street Address	Employer/Occupation/Labor Organization*							Form (Cash, Check, etc.)		
City	St	nte	Zip Code	,	.1	D		Y		Amount
					1		٠	ļ		<u></u>

*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 \$ 5.00

