31-A
R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
DOUG JOSEPH ELECTION FUND							
Full Name of Contributor						Registration Number, if PAC	
WILLIAM SCHUCK							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
1322 LANCASTER AVE.							CHECK
City	State	Zip Code	M	D	Y		Amount
REYNOLDSBURG	O | H	43068	02	29	16		20.00
Full Name of Contributor						Registration Number, if PAC	
WILLIAM SCHUCK							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
1322 LANCASTER AVE.							
City	State	Zip Code	M	D	Y		Amount
REYNOLDSBURG	O | H	43068	03	15	16		20.00
Full Name of Contributor						Registration Number, if PAC	
WILLIAM SCHUCK							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
1322 LANCASTER AVE.							
City	State	Zip Code	M	D	Y		Amount
REYNOLDSBURG	O | H	43068	03	31	16		20.00
Full Name of Contributor						Registration Number, if PAC	
WILLIAM SCHUCK							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
1322 LANCASTER AVE.							
City	State	Zip Code	M	D	Y		Amount
REYNOLDSBURG	O | H	43068	04	18	16		20.00
Full Name of Contributor						Registration Number, if PAC	
WILLIAM SCHUCK							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
1322 LANCASTER AVE.							
City	State	Zip Code	M	D	Y		Amount
REYNOLDSBURG	O | H	43068	04	29	16		20.00
Full Name of Contributor						Registration Number, if PAC	
WILLIAM SCHUCK							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
1322 LANCASTER AVE.							
City	State	Zip Code	M	D	Y		Amount
REYNOLDSBURG	O | H	43068	05	13	16		20.00
Full Name of Contributor						Registration Number, if PAC	
WILLIAM SCHUCK							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
1322 LANCASTER AVE.							
City	State	Zip Code	M	D	Y		Amount
REYNOLDSBURG	O | H	43068	05	31	16		20.00
Full Name of Contributor						Registration Number, if PAC	
WILLIAM SCHUCK							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
1322 LANCASTER AVE.							
City	State	Zip Code	M	D	Y		Amount
REYNOLDSBURG	O | H	43068	06	15	16		20.00

* 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 $ 160.00