## Page \_\_\_\_\_

## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full FRIENDS OF JOY HARRIS  Foll Name & Contribution									
Joseph muldrow					Registration Number, if PAC				
3301 Chim ney Rode	Limpiove	e/Occup	ation/Labor Organization*				•	Form (Cash, Check, etc.)	
City Las Cruces,	√ Sta	ete .M	Zip Code, 80//	MC	2/13	30	¥/7.	Amount 100 100	
Full Name of Contributor Registration Registration							if PA	C	
Street Archaess	Employer	/Occupe	tion/Labor Organization*	ch ,	Res	10	<u>~</u>	Form (Cash, Check, etc.)	
City Cincinnecti	Sta 27		Zip Code 45229	M	3	70	10	Amount SU	
Full Name of Contributor	Registration Number, if PA						if PA	c	
Street Address	mployer	<del>-</del>	Form (Cash, Check, etc.)						
City	Ster	te	Zip Code	M.	D	Y	7.	Amount	
Full Name of Contributor , Registration Number, if PA								to the second	
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)		
City	Stat	te .	Zip Code	М	Ď	Y	7	Amount	
Ill Name of Contributor Registration Number, if PA								3	
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)		
City	Stat	te	Zip Code	M	D	Y		Amount	
Full Name of Contributer Registration Number, if PA							fPA	2	
Street Address	Employer/Occupation/Labor Organization*							Form (Cash, Check, etc.)	
City	Stat	te	Zip Code	M	D	Ŷ		Amount .	
Full Name of Contributor Registration Number, if PA							FPAC		
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)		
City	Stat	te	Zip Code	М	D	Y		Amount	
Full Name of Contributor Registration Number, if PAC									
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)		
City	State	e i	Zip Code	M	D	Y	-	Amount	
quired for contributions from individuals over \$100 to statewide and genera	al assembly	y candida	ites. If contributor is self-employ	ed, the o	ccupation	n and	the n	ame of the	
			<u>.</u>		-				

\* Required for communicians from nutriculasis over \$100 to statewise and general assembly canadiates. It communion 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 \$ 200

Danie Lell