31-J-1
R C. 3517,10

FOR PAPER FILING ONLY

ributions Received

by Secretary of State 3/05

Name of Committee in Full		
Paini for Tructor		
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
Victor Paini		
Street Accress	Description of Item or Service	M D Y Fair Market Value
7296 Porter Dr	Target Business Services	
City	State Zip Code	Received at Fundraising Event?
Canal Winchester	O 1 H 43110	YES NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Fair Market Value
City	State Zip Code	Received at Functioning Event?
		YES NO
Full Name of Contributor	Employer, Occupation, Labor Organization	Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Fair Market Value
City	State Zip Code	Received at Fundraising Event?
		YES NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Faur Market Value
City	State Zip Code	Received at Fundraising Event? YES NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Fair Market Value
City	State Zip Code	Received at Fundraising Event?
ON,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	YES NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
Street Address	Description of Item or Service	M. D. Y. Fair Market Value
Quadrina and		
City	State Zip Code	Received at Fundraising Event?
Only .		YES NO
Full Name of Contributor	Employer, Occupation, Labor Organization	Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Faut Market Value
City	State Zip Code	Received at Fundraising Event? YES NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC
Full Name of Contributor Street Address	Employer, Occupation, Labor Organization Description of Item or Service	Registration Number, if PAC M D Y Fair Market Value
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* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contribution 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 commute we 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)]

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