Statement of Contributions Received

Page Got K

Prescribed by Secretary of State 03/05

Name of Committee in Full	···			
Committee TO Elect	ノナイタイツ	5		
Full Name of Contributor			Registration Number, if	PAC
4 nAOT: sirram	ナゲイガマ			
Street Address	Employer/Occupa	ation/Labor Organization*		Form (Cash, Check, etc.)
125 JAN 55				chech
City	State	Zip Code	M D Y	Amount
GANYLA	NY	14456	را را حام ا	50.00
Full Name of Contributor Registration 1				
J. Scott weisman				
5. SCOTT WYSMAN	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
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City	State	Zip Code	M D Y	Amount
(0/	01+	43215	103-11	150.00
Full Name of Contributor	,	<u> </u>	Registration Number, if	
Dernis I-asqui				
Street Address	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
HAZ CITH PAGN	' '	5		(Wik
City	State	Zip Code	-M D Y	Amount
columnis	oh	43315	10 261,	25.00
Full Name of Contributor			Registration Number, if	
Robert Lerkon				
Street Address	Employer/Occarpa	tion/Labor Organization		Form (Cash, Check, etc.)
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City 6-41 N. 1416 45#3	State	Zip Code	M n v	Amount
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Full Name of Contributor	0 4,	13912	Registration Number, if	50.00
A S				
Street Address	Employer/Occurs	tion/Labor Organization		Form (Cash, Check, etc.)
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City 60 Andrive	State	Zip Code	SM N V	Amount
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Full Name of Contributor	DIT	43419	70001	35.00
registation (vanion, in the				
LAUSAL BEATTY	T= '			
	1 ' ' '	tion/Labor Organization*		Form (Cash, Check, etc.)
068 E. GARES 35	State	Zip Code	lessed Test Field	CASh
rolumbes		113306	M D Y	Amount
Full Name of Contributor	614	1300	111 (60 11	50.00
			Registration Number, if	PAC
michael philaba	<u> </u>			
Street Address	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
601 3. Hinn 55				CASh
City	State	Zip Code	M D Y	Amount
(olumbes office	01+	-13906	103711	90.00
Full Name of Contributor Registration Number, if PAC				
Winと				
Street Address	Employer/Occupa	tion/Labor Organization		Form (Cash, Check, etc.)
gen simply st				(45h
City	State	Zip Code	M D Y	Amount
(0)-mb-3	01+	413 206	ال المراق المالية	25.00

Page Total \$ 405

^{*}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 also appear. [R.C. 3517.10(B)(4)]