3	1-	À		
R	LC.	35	17.	10

Page ____

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Full Name of Countributer Full Name of Countrib	Name of Committee in Full					-			
DATE OF STATE Control	Pamela Sue	Hall	luss						
Columbus Columb	Full Name of Contributor OADSE ASS. ME TURNING	100.4440	6110 OAZ 1A	Registra			_		
Columbus Columb	DAYSE MISCHE LAKIVA	KUUNU	DAID MAC AM		10	<u>6</u>	9		
Columbus Columb	6805 Oak Creek Drive	Employer/Occupa	tion/Labor Organization*				Check		
Fall Name of Contributor Sureet Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Sureet Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Form (Cash, Check, etc.) Sureet Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Sureet Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Sureet Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.)		State	Zip Code	M /	09	O	7 = 500 00		
Fell Name of Contributor Servet Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) City State OH State Zip Code OH Registration Number, if PAC Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.)	Full Name of Contributor	<u> </u>	1 Umal	Pagistra					
Fell Name of Contributor Servet Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) City State OH State Zip Code OH Registration Number, if PAC Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.)	Pamela Sue Hallum						IPAC		
Fell Name of Contributor Servet Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) City State OH State Zip Code OH Registration Number, if PAC Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.)	Street Address 5136 Edgeview Road Employer/Occupation/Labor Organization						Form (Cash, Check, etc.)		
Fell Name of Contributor Servet Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) City State OH State Zip Code OH Registration Number, if PAC Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.) Form (Cash, Check, etc.)	City Columbus	State OH	Zip Code 43207	M	D	Y	Amount		
City State Zip Code Ne D Y Amount Full Name of Countbutor Street Address Employer/Occupation/Labor Organization Registration Number, if PAC Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) City State Zip Code M D Y Amount Form (Cash. Check. etc.) City State Zip Code M D Y Amount Full Name of Countbutor Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) City State Zip Code M D Y Amount Form (Cash. Check. etc.) Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) City State Zip Code M D Y Amount Full Name of Countbutor Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) City State Zip Code M D Y Amount Full Name of Countbutor Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) City State Zip Code M D Y Amount Full Name of Countbutor Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.)	Full Name of Contributor								
City State Zip Code Ne D Y Amount Full Name of Countbutor Street Address Employer/Occupation/Labor Organization Registration Number, if PAC Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) City State Zip Code M D Y Amount Form (Cash. Check. etc.) City State Zip Code M D Y Amount Full Name of Countbutor Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) City State Zip Code M D Y Amount Form (Cash. Check. etc.) Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) City State Zip Code M D Y Amount Full Name of Countbutor Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) City State Zip Code M D Y Amount Full Name of Countbutor Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) City State Zip Code M D Y Amount Full Name of Countbutor Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.)									
Full Name of Contributor Registration Number, if PAC	Street Address	Address Employer/Occupation/Labor Organization					Form (Cash, Check, etc.)		
Fell Name of Contributor Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) City State Zip Code OH Registration Number, if PAC Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) City State OH City State City S	City		Zip Code	M	D	Yį	Amount		
Street Address		OH							
City State Zip Code M. D. Yi Amount Full Name of Contributor Employer/Occupation/Labor Organization* Form (Cash. Check, etc.) Street Address Employer/Occupation/Labor Organization* Form (Cash. Check, etc.)	Full Name of Contributor			Registra	ition Nu	mber, il	FPAC		
Full Name of Contributor Street Address Employer/Occupation*Labor Organization* Form (Cash, Check, etc.) Street Address Employer/Occupation*Labor Organization* Full Name of Contributor Street Address Employer/Occupation*Labor Organization* Form (Cash, Check, etc.) Form (Cash, Check, etc.) Form (Cash, Check, etc.) Street Address Employer/Occupation*Labor Organization* Form (Cash, Check, etc.)	Street Address	Employer/Occupat	tion/Labor Organization*				Form (Cash. Check, etc.)		
Street Address Employer/Occupation*Labor Organization* Form (Cash, Check, etc.) State OH State OH Employer/Occupation*Labor Organization* Registration Number, if PAC Street Address Employer/Occupation*Labor Organization* Form (Cash, Check, etc.) State OH	City		Zip Code	M	D	1	Amount		
Street Address Employer/Occupation*Labor Organization* Form (Cash, Check, etc.) State OH	Full Name of Contributor	<u> </u>		Registra	tion Nu	mber, if	PAC		
City State OH State OH Registration Number. if PAC Street Address Employer/Occupation/Labor Organization Registration Number. if PAC						·			
Full Name of Contributor Street Address Employer/Occupation/Labor Organization' State OH Zip Code Nt D Yi Amount Form (Cash. Check. etc.) Street Address Employer/Occupation/Labor Organization' Form (Cash. Check. etc.) Street Address Employer/Occupation/Labor Organization' Form (Cash. Check. etc.) Street Address Employer/Occupation/Labor Organization' Form (Cash. Check. etc.) State OH Zip Code M D Yi Amount Full Name of Contributor State State Zip Code M D Yi Amount Street Address Employer/Occupation/Labor Organization' Form (Cash. Check. etc.)	Street Address	Employer/Occupat	tion/Labor Organization				Form (Cash, Check, etc.)		
Full Name of Contributor Street Address Employer/Occupation/Labor Organization* Form (Cash. Check. etc.) City Strate OH Employer/Occupation/Labor Organization* Registration Number. if PAC Street Address Employer/Occupation/Labor Organization* Form (Cash. Check. etc.) City State OH Street Address Employer/Occupation/Labor Organization* Form (Cash. Check. etc.) Form (Cash. Check. etc.) Street Address Employer/Occupation/Labor Organization* Form (Cash. Check. etc.) Street Address Employer/Occupation/Labor Organization* Form (Cash. Check. etc.)	City	State	Zip Code	M	D	Yi	Amount		
Street Address Employer/Occupation/Labor Organization* Form (Cash. Check, etc.) State OH Full Name of Contributor Employer/Occupation/Labor Organization* Form (Cash. Check, etc.) Street Address Employer/Occupation/Labor Organization* Form (Cash. Check, etc.) Form (Cash. Check, etc.) Form (Cash. Check, etc.) Street Address Employer/Occupation/Labor Organization* Form (Cash. Check, etc.) Street Address Employer/Occupation/Labor Organization* Form (Cash. Check, etc.)		OH							
City State Zip Code M D Yi Amount Full Name of Contributor Employer/Occupation/Labor Organization Form (Cash. Check, etc.) Street Address Employer/Occupation/Labor Organization Registration Number, if PAC Street Address Employer/Occupation/Labor Organization Registration Number, if PAC Street Address Employer/Occupation/Labor Organization Form (Cash. Check, etc.)	Full Name of Contributor					Registration Number, if PAC			
Full Name of Contributor Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) State OH City State OH Registration Number. if PAC Form (Cash. Check. etc.) Registration Number. if PAC Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.)	Street Address	Employer/Occupat	tion/Labor Organization				Form (Cash. Check, etc.)		
Full Name of Contributor Street Address Employer/Occupation/Labor Organization Form (Cash. Check, etc.) State OH OH OH OF Organization Registration Number, if PAC Form (Cash. Check, etc.) Amount Street Address Employer/Occupation/Labor Organization Form (Cash. Check, etc.) Form (Cash. Check, etc.)	City	1	Zip Code	M	D	T Yi	Amount		
Street Address Employer/Occupation/Labor Organization State OH Zip Code M D Y Amount Full Name of Contributor Street Address Employer/Occupation/Labor Organization Registration Number. if PAC Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.)		OH				<u> </u>			
City State OH State OH State OH Registration Number. if PAC Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) City State Zip Code M D Yi Amount	Full Name of Contributor			Registra	tion Nur	nber, if	PAC		
Full Name of Contributor Registration Number, if PAC Street Address Employer/Occupation/Labor Organization* Form (Cash. Check. etc.) City State Zip Code M D Y Amount	Street Address	Employer/Occupat	ion/Labor Organization	I .			Form (Cash. Check, etc.)		
Street Address Employer/Occupation/Labor Organization Form (Cash. Check. etc.) City State Zip Code M D Yi Amount	City		Zip Code	M	D	Y	Amount		
City State Zip Code M D Y Amount						PAC			
	Street Address	Employer/Occupan	ion/Labor Organization				Form (Cash. Check, etc.)		
	City		Zip Code	M	D)	Amount		

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)]