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Statement of Contributions Received

	1	
Page	<u> </u>	

Prescribed by Secretary of State 03/05

9						
Name of Committee in Full Central Ohio Realtors Political Action C	ommittee					
Full Name of Contributor			Regist	ration Nu	mber, if P	PAC
41-Page computer listing of contributions	received is at	rtached				
Street Address	Employer/Occi	upation/Labor Organization				Form (Cash, Check, etc.)
for use in 2014		,				
City	State	Zip Code	M	D	Y	Amount
	OH.	<u>,</u>				\$77,365.00
Full Name of Contributor			Registr	ration Nu	mber, if P	AC
National Association of Realtors						
Street Address	Employer/Occi	upation/Labor Organization				Form (Cash, Check, etc.)
Wire trans. State Exchange	<u> </u>					
City	State	Zip Code	M	D	I, Y	Amount
	OH		1 p	1 4	1 4	\$55,000.00
Full Name of Contributor		Registration Number, if PAC				
Street Address	Employer/Occu	upation/Labor Organization				Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
	OH					
Full Name of Contributor	Registration Number, if PAC					
Street Address	Employer/Occu	upation/Labor Organization				Form (Cash, Check, etc.)
City	State	Zip Code	I M	1 Di	T vi	Amount
	OH	r	1 1			·
Full Name of Contributor			Registr	ration Nu	mber, if P	AC
Street Address	Employer/Occi	upation/Labor Organization				Form (Cash, Check, etc.)
-	Employerroccu	pation/Labor Organization				Tom (Caon, Chron, Carry
City	State	Zip Code	<u> </u>	1 DI	I Vi	Amount
	ОН	'				
Full Name of Contributor	<u> </u>		Registr	ration Nu	mber, if P	AC
						!
Street Address	Employer/Occupation/Labor Organization					Form (Cash, Check, etc.)
	' '					
City	State	Zip Code	М	D	Ŋ	Amount
	OH					
Full Name of Contributor	 !		Registr	ration Nur	nber, if P	AC
Street Address	151	1 7 1 - 0 - 1 - 1 - 1				Form (Cash, Check, etc.)
Succe Addition	Employer/Occupation/Labor Organization		•			FOIH (Cash, Check, Cic.)
City	State	Zip Code	M	P	TY	Amount
	OH					•
Full Name of Contributor Registration Numb					nber, if P	AC
Street Address	Employer/Occu	upation/Labor Organization*				Form (Cash, Check, etc.)
P		12: 6.1			1 14	ļ
City .	OH	Zip Code	M			Amount

Page Total \$132,365.00

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