Page	

## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Euli								
Name of Committee in Full								
Friends for Paul Bingle Full Name of Contributor				Posistration Number if DAC				
				Registration Number, if PAC				
Contribitions from 31-E	Employee/Oo	westion/Labor Organization*				Form (Cash, Check, etc.)		
Street Address	Employer/Occupation/Labor Organization*					roini (Casii, Check, Etc.)		
City	State	Zip Code	М	D	Y	Amount		
			11/0	I OK	07	1,140.00		
Full Name of Contributor	C							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount		
		<u>)</u>	D. i.d.		L- CDA			
Full Name of Contributor Registration Number, if PAC								
Street Address	Employer/Oc	cupation/Labor Organization*		** . *		Form (Cash, Check, etc.)		
0,000	,,					(* , * , ,		
City	State	Zip Code	М	D	Y	Amount		
					1			
Full Name of Contributor			Regist	ration Nur	nber, if PA	AC .		
Street Address Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)		
		· · · · · · · · · · · · · · · · · · ·						
City	State	Zip Code	M	D	Y	Amount		
5.11.3			Davist	ntina Nive	nber, if PA			
Full Name of Contributor	XC							
Street Address Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)		
Shoot / Nadoss	Employer/ovedpation Labor Organization							
City	State	Zip Code	М	D	Y	Amount		
			.					
Full Name of Contributor			Regist	ration Nur	nber, if PA	AC .		
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
City	State	Zip Code	М	D	Y	Amount		
			7	1 27	1 1504			
Full Name of Contributor				Registration Number, if PAC				
Street Address Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)			
Employer/Occupation/Lacos Organization								
City	State	Zip Code	М	D	Y	Amount		
Full Name of Contributor Registration Number, if PA						AC		
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
City	State	Zip Code	M	D	Y	Amount		
contributions from individuals over \$100 to statewide and gen			بلبلب		Щ.	<u></u>		

\* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 1,140.00