

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full									
Laborers' International Union of North America, Local 423 PAC									
Full Name of Contributor						Registration Number, if PAC			
Christopher Haught						LA912			
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
41500 Coolville Rd									
City	State	Zip Code	M	D	Y	Amount			
Reedsville	OH	45772	03	23	11	75.00			
Full Name of Contributor						Registration Number, if PAC			
Kevin Layman						LA912			
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
304 E. Water									
City	State	Zip Code	M	D	Y	Amount			
Baltimore	OH	43105	03	23	11	75.00			
Full Name of Contributor						Registration Number, if PAC			
Jason Brandeberry						LA912			
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
23003 Clay Lick Rd									
City	State	Zip Code	M	D	Y	Amount			
Logan	OH	43138	03	23	11	75.00			
Full Name of Contributor						Registration Number, if PAC			
Vincent Stokes						LA912			
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
6045 Telford									
City	State	Zip Code	M	D	Y	Amount			
Cols	OH	43229	04	07	11	75.00			
Full Name of Contributor						Registration Number, if PAC			
Thomas Barcia						LA912			
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
4594 Cosgray Rd									
City	State	Zip Code	M	D	Y	Amount			
Hilliard	OH		04	07	11	75.00			
Full Name of Contributor						Registration Number, if PAC			
Rick Bryan						LA912			
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
475 S. Burgess Ave.									
City	State	Zip Code	M	D	Y	Amount			
Cols	OH	43204	04	07	11	75.00			
Full Name of Contributor						Registration Number, if PAC			
Arturo Olivar						LA912			
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
7759 Flint Valley Ct.									
City	State	Zip Code	M	D	Y	Amount			
Cols	OH	43085	04	07	11	75.00			
Full Name of Contributor						Registration Number, if PAC			
Kandel Wilkins						LA912			
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
13100 St Rt 62 NE									
City	State	Zip Code	M	D	Y	Amount			
Mt. Sterling	OH	43143	04	03	11	75.00			

* 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)]