

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full NEW FIRE STATION FUND									
Full Name of Contributor IAFF LOCAL 2932 (ZACH LECKRONE)						Registration Number, if PAC			
Street Address 6900 E. MAIN STREET			Employer/Occupation/Labor Organization* IAFF LOCAL 2932				Form (Cash, Check, etc.) CHECK		
City REYNOLDSBURG			State OH	Zip Code 43068		M 1	D 1	Y 0	Amount \$1,762.98
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City			State OH	Zip Code		M	D	Y	Amount
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City			State OH	Zip Code		M	D	Y	Amount
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Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City			State OH	Zip Code		M	D	Y	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)]

Page Total **\$1,762.98**