

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full									
COLUMBUS FIREFIGHTERS UNION L-67 PAC FUND									
Full Name of Contributor						Registration Number, if PAC			
Transfer of 1520 individual membership dues									
Street Address			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)		
379 WEST BROAD ST.							CHECK		
City			State		Zip Code		M	D	Y
COLUMBUS			O H		43215		0	4	2
							4	1	8
							Amount		
							1,520.00		
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		
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		
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City			State		Zip Code		M	D	Y
							Amount		
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City			State		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 appear. [R.C. 3517.10(B)(4)]