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Statement of Contributions Received

Prescribed by Secretary of State 8/95

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Name of Committee in Full Compile to Release Ame Hallman Parter to Besty City Council Registration Number, if PAC Form (Cash, Cheek, etc.) Street Address Lo SCSSIONS Dr. City Columbus Columbus Registration Number, if PAC Form (Cash, Cheek, etc.) Cash Columbus Registration Number, if PAC Registration Number, if PAC												
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	CONTRACTOR CONTRACTOR											

*Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation rather than employer should be listed. If two or more employees donate 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 \$ 5.00



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