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## **Statement of Contributions Received**

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Page		

Prescribed by Secretary of State 03/05

Name of Committee in Full Laborers Local423							
Full Name of Contributor		<del></del>	Registrat	ion Num	ber, if Pa	AC	
Laborers Local 423			ŭ		•		
Street Address	Employer/Occu	pation/Labor Organization				Form (Cash, Check, etc.)	
620 Alum Creek Dr., Suite 202		Local 423				check	
City	State	Zip Code	M	D	Yi	Amount	
Columbus	OH	43205	о з	10	1 5	\$25,000.00	
Full Name of Contributor			Registrat	ion Num	ber, if PA	AC .	
Street Address			L			Form (Cash, Check, etc.)	
Side Out ( Note Out)	Employer/Occu	Employer/Occupation/Labor Organization*					
City	State	Zip Code	М	D	Yı	Amount	
-	OH						
Full Name of Contributor		— <del></del>	Registrat	ion Num	ber, if P	AC	
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
	OH						
Full Name of Contributor		<u>'</u>	Registrat	ion Num	ber, if P.	AC .	
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
	OH						
Full Name of Contributor			Registrat	ion Num	ber, if PA	AC	
Street Address	Employer/Occu	pation/Labor Organization			····	Form (Cash, Check, etc.)	
		•					
City	State	Zip Code	M	D	Y	Amount	
	OH			,			
Full Name of Contributor	· · · ·	•	Registrat	ion Num	iber, if PA	AC	
	·					To	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D,	Yı	Amount	
	OH						
Full Name of Contributor				Registration Number, if PAC			
Street Address	Employer/Ocat	pation/Labor Organization*				Form (Cash, Check, etc.)	
	Imployences	quadra caroni Organization					
City	State OH	Zip Code	M	D	Y	Amount	
Full Name of Contributor			Registra	tion Num	ber, if P	AC	
Street Address	Employer/Occu	npation/Labor Organization				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y <sub>i</sub>	Amotent	
City	OH	Lap cour					

Page Total \$25,000.00

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)]