

# Statement of Contributions Received 1: 54

Prescribed by Secretary of State 8/95

FRANKLIN COUNTY  
BOARD OF ELECTIONS

Name of Committee in Full U A Homeowners for New Jobs, PAC									
Full Name of Contributor SEE EXCEL SPREADSHEET ATTACHED							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
Full Name of Contributor							Registration Number, if PAC		
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Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State		Zip Code		M	D	Y	Amount

\*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)