Statement of Contributions Received

Page 1

Prescribed by Secretary of State 03/05

Name of Committee in Full PALEY FOR COLUMBUS					
Full Name of Contributor Columbus Apartment Association PAC	androgomo y na ji- iyin kangalaman antar gama amuu gama anaan gama ahaan ya ma'a caanada ya araa caanada ahaa 1900 ili ili uu ma'a anaa ahaa 2000 ili			Registration Number, if PAC 6H1H6	
Street Address 1225 Dublin Road	Employer/Occupa	ation/Labor Organization*			Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43215	1 1 1 1	6 0 9	Amount \$500.00
				Registration Number, if PAC OH 1301	
GSP Ohio PAC Street Address	Employer/Occup			Form (Cash, Check, etc.)	
511 Union Street	Employer/Occup	Employer/Occupation/Labor Organization*			check
^{City} Nashville	State TN	Zip Code 37219	<u> </u>	7 0 9	Amount \$500.00
Full Name of Contributor Registration Number, if Law Office of Jay Perez, LLC					AC
Street Address 6797 N. High Street	Employer/Occup	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	1 1 1	0 0 9	Amount \$100.00
Full Name of Contributor JP Morgan Chase & Co. PAC			Registration COO!	Number, if P. 1285/	′Z
Street Address 10 S. Dearborn Street	Employer/Occup	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check
City Chicago	State	Zip Code 60603	1 0 2	O D 9	Amount \$1,000.00
Full Name of Contributor Registration Number, if P					AC
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	Starte OH	Zip Code	MI	O Y	Amount
Full Name of Contributor Registration Number, if					PAC
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State OH	Zip Code	M	D Y	Amount
Full Name of Contributor Registration Number, if P.					PAC
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State OH	Zip Code	M	D Y	Amount
Full Name of Contributor Registration Number, if F					PÁC
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State OH	Zip Code	M	D Y	Amount

Page Total \$2,100.00

^{*} 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)]