

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full					•		
Ebner for Judge							
Full Name of Contributor				Registration Number, if PAC			
International Brotherhood of Electrical Workers PAC			1 COBB 27342				
Street Address		oation/Labor Organization*		7 7	7	Form (Cash, Check, etc.)	
1825 K Street, N.W.						Check	
City	State	Zip Code	М	D	Y	Amount	
Washington	DC	20006	1 2	012	1 5	1,000.00	
Full Name of Contributor		<u> </u>			ber, if P/	AC	
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Full Name of Contributor Registration Number, if F						NC .	
Street Address	Employer/Occup	estion/Labor Organization*				Form (Cash, Check, etc.)	
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Page Total \$ 1,000.00

^{*} 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 appear. [R.C. 3517.10(B)(4)]