

## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

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Name of Committee in Full	NII (7DAC	ELINID						
COLUMBUS FIREFIGHTERS UNION L-67 PAC FUND				Registration Number, if PAC				
Full Name of Contributor  Transfer of 1491 individual member	chin duec		Rogistiat	ion i vann	,01, 12 2 7 1			
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Check, etc.)		
379 WEST BROAD ST.		, ,				CHECK		
City	State	Zip Code	М	D	Y	Amount		
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\* 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)]

Page Total \$ 1,491.00