10

Statement of Contributions Received



Prescribed by Secretary of State 03/05

Name of Committee in Full				
Thind IA so = = TINU				
Full Name of Contributor			Pacietaties N. 1. :Cr	
2018. A wins, 4. Blace			Registration Number, if F	AC
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.
as wyrongen				C 0.541
City Color Color	State OH	Zip Code	M 6 2 5 9	Amount
Full Name of Contributor			Registration Number, if P.	AC
K, Susan Corbin				
Street Address 4460 HOUR Rock	Employer/Occup	ation/Labor Organization*		Form (Cash, Check, etc.)
City Coll Call	State OH	Zip Code	M D Y	Amount
Full Name of Contributor			Registration Number, if P	L 1JU
Deborah L. Wackwall				
Street Address U395 Lovidon Grow Vd	Employer/Occupa	ation/Labor Organization*		Form (Cash, Check, etc.)
City CARILEAT	State OH	Zip Code	M D Y	Amount
Full Name of Contributor On 11 Contributor			Registration Number, if P/	AC
Street Address	Employer/Occupa	ation/Labor Organization*		Form (Cash, Check, etc.)
City Coll Cidy	State OH	Zip Code	M D Y	Amount 60
Full Name of Contributor Registration Number, if PAC				
Street Address		tion/Labor Organization*		Form (Cash, Check, etc.)
a 2 3 to Vyolia cotany				ÓĆ
City Caralle City	OH State	Zip Code		Amount
Full Name of Contributor Registration Number, if PAC				
Street Address 25 S S S S S S S S S S S S S S S S S S S	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City Carlo Carlo	State OH	Zip Code	M D Y	Amount 760°2
Full Name of Contributor		***************************************	Registration Number, if PA	C
Contract Star Operal Scotting				
Street Address	Employer/Occupat	ion/Labor Organization*		Form (Cash, Check, etc.)
City Control 5	State OH	Zip Code	M D Y	Amount
Full Name of Contributor Registration Number, if PAC				
Strong Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
2233 70/6H4 MAC				
City Corto City	State OH	Zip Code		Amount

7475

Page Total

1940

^{*} 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)]