



**Contributions from a Corporation or Labor Organization
Supporting or Opposing a Ballot Issue**

Form 30-B-1

ORC 3599.03

2019 JUN 14 PM 2:06

| | | | | | | | |
|--|--|------------------|--|---|---|--|--|
| Name of Corporation or Labor Organization Fifth Third Bank Co | | | | FRANKLIN COUNTY BOARD OF ELECTIONS | | | |
| Street Address 21 E State St. | | City Columbus | | State OH | Zip 43215 | | |
| Type of Report: <input type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-General <input type="checkbox"/> Pre-Special <input type="checkbox"/> Annual <input checked="" type="checkbox"/> Post-Primary <input type="checkbox"/> Post-General <input type="checkbox"/> Post-Special <input type="checkbox"/> Semiannual | | | | Year <input type="text" value="2019"/> | Election Date (MM/DD/YYYY) <input type="text" value="05/07/2019"/> | | |

Contribution Information

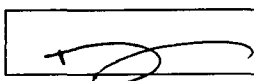
| | | | | | | |
|--|--|------------------|--|----------------------------------|-------------------------------|--------------------|
| Receiving Committee Opportunity City PAC | | | | | Date (MM/DD/YYYY) 5/7/2019 | |
| Street Address 545 E Town St | | City Columbus | | State OH | Zip 43215 | Amount \$10,000 |
| Ballot Issue Description/Ballot Issue Number Various City of Columbus Bond Issues | | | | Cash/Check/Item/Service Check | | |

| | | | | | | |
|--|--|------|--|-------------------------|-------------------|--------|
| Receiving Committee | | | | | Date (MM/DD/YYYY) | |
| Street Address | | City | | State | Zip | Amount |
| Ballot Issue Description/Ballot Issue Number | | | | Cash/Check/Item/Service | | |

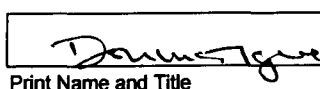
| | | | | | | |
|--|--|------|--|-------------------------|-------------------|--------|
| Receiving Committee | | | | | Date (MM/DD/YYYY) | |
| Street Address | | City | | State | Zip | Amount |
| Ballot Issue Description/Ballot Issue Number | | | | Cash/Check/Item/Service | | |

| | | | | | | |
|--|--|------|--|-------------------------|-------------------|--------|
| Receiving Committee | | | | | Date (MM/DD/YYYY) | |
| Street Address | | City | | State | Zip | Amount |
| Ballot Issue Description/Ballot Issue Number | | | | Cash/Check/Item/Service | | |

**THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER PENALTY OF ELECTION FALSIFICATION.
WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.**


Signature of Authorized Representative

Date (MM/DD/YYYY)


Print Name and Title