## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full						<del></del>	
Natrolie West Nicodomus for Fiscal Officer							
Full Name of Contributor 1st Service Federal Credit Unio							
Street Address  ION Min (+		on/Labor Organization				Form (Cash, Check, etc.)	
City	State	Zip Code 113175	M/	311	<b>b</b>	Amount D 3	
Full Name of Contributor		4312	Parietratio	n Numbe	- if DA	.00	
1st Service Federal Credit Union							
Street Address 100 Main St	Employer/Occupation	on/Labor Organization				Form (Cash, Check, etc.)	
City,	State	Zip Code 4317.5	M33	311	1/2	Amount	
Full Name of Contributor  St. Sprvice Federal Credit Union  Registration Number, if PAC							
	Employer/Occupation	on/Labor Organization				Form (Cash, Check, etc.)	
City, Choost	State	Zip Code 113175	MU	2/1/1	1/5	23	
Full Name of Contributor	$\frac{\mathcal{U}(1)}{2}$	1.00	Registratio	n Numbe	t, if PA	<i>ر د د</i> د	
TO SENUMO ROUNCE OF	each l	LMDP.				Farm (Cash Chash as )	
100 Main St	Employer/Occupation	on/Labor Organization				Form (Cash, Check, etc.)	
City CORDUP CORT	State	43725	09	30	Ϋ́Z	Amount 23	
Full Name of Contributor   Registration Number, if PAC							
Street Address	Employer/Occupation	on/Labor Organization				Form (Cash, Check, etc.)	
City CONDOCT	State	zip Code 43)75	1/2	311	ľ2	ATDOURT 23	
Full Name of Contributor				Registration Number, if PAC			
Street Address	Employer/Occupation/Labor Organization					Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Amount	
Full Name of Contributor			Registration Number, if PAC				
Street Address	Employer/Occupati	on/Labor Organization	L			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D)	<u>\</u>	Amount	
Full Name of Contributor Registration Number, if P.					t x, if PA	c	
						Form (Cash, Check, etc.)	
Street Address	Employer/Occupation/Labor Organization						
City	State	Zip Code	M	D	Y	Amount	

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)]