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R	c	3517	10

## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full						
REYNOLDSBURG CITIZENS FOR R	ESPONSIBI	<u>.e governmen</u>				
Full Name of Contributor			Registration Number, if PAC			
DOUG JOSEPH						
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Check, etc.)
9250 HUGGINS LANE						CASH
City	State	Zip Code	M	D	Y	Amount
REYNOLDSBURG	OH	43068	0 1	2 1	1 3	13.27
Full Name of Contributor			Registra	ntion Num	ber, if PA	C
Street Address	Employer/Occu	pation/Labor Organization*	<u> </u>			Form (Cash, Check, etc.)
City	State	Zip Code	М	D	Y	Amount
	1			lι		
Full Name of Contributor	<del></del>		Registro	ation Num	ber, if PA	AC .
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)
		Turn o d	-1-:-	1 -	1	
City	State	Zip Code	M	D	Y	Amount
6 1121 - 100 - 10			Danister	ation Nurr	har if PA	<u> </u>
Full Name of Contributor			Registra	ation ivan	ioci, ii rz	
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	M	D	Y	Amount
	ţ					_
Full Name of Contributor			Registra	ation Num	ber, if PA	AC .
Street Address	Employer/Occupation Labor Organization			Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	ΙΥ	Amount
City			1 "		1	
Full Name of Contributor		<u> </u>	Registr	ation Nun	iber, if PA	AC .
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
City	State	Zip Code	М	D	ΙΥ	Amount
City	State	In code	"		Ι'n	,
Full Name of Contributor			Registr	ation Nun	ber, if P/	NC .
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)
Silver Address	Zinpioyen	franco zaco, o fermano.				
City	State	Zip Code	М	D	Y	Amount
Full Name of Contributor	<u>'</u>	<u> </u>	Registr	ation Nus	nber, if PA	AC
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)			
City	State	Zip Code	М	D	Y	Amount
					ĺ	

Page Total \$	13.27

<sup>\*</sup> 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)]