

## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full							
COLUMBUS FIREFIGHTERS UNION	L-67 PAC	FUND					
Full Name of Contributor				Registration Number, if PAC			
Transfer of 3046 individual membersh	ip dues						
Street Address		pation/Labor Organization*				Form (Cash, Check, etc.)	
379 WEST BROAD ST.	ļ		•			CHECK	
City	State	Zip Code	М	D	Y	Amount	
COLUMBUS	OIH	43215	019	2 9	115	3,046.00	
					Registration Number, if PAC		
Street Address				Form (Cash, Check, etc.)			
	Employer/Occupation/Labor Organization*					1 ' ' '	
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Full Name of Contributor	<u>.                                    </u>	_!	Registr	ation Nur	nber, if P	AC.	
Full Name of Contributor Registration Number, if PAC							
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Full Name of Constitution				Registration Number, if PAC			
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E UNIVERSE CONTRACTOR	<u> </u>		Pagista	nian Nive	ober if D	1 · · · · · · · · · · · · · · · · · · ·	
Full Name of Contributor Registration Number, if P.						AC	
Street Address Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
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City	State	Zip Code	M	D	Y	Amount	
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Full Name of Contributor Registration Number, if PA						AC	
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Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
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Full Name of Contributor Registration Number, if PAC						AC	
Street Address Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)	
City	State	Zip Code	M	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 \$ 3,046.00