Page ~	2
--------	---

## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee						
Full Name of Contributor Columbus Firefighters Union L-67 PAC Fund			Registration Number, if PAC			
Street Address 1380 Dublin Rd	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215-1025	M 02	D 25	Y 2013	Amount \$500.00
Full Name of Contributor Columbus Medical Association PAC			Registration Number, if PAC C00407569			
Street Address 431 E Broad St	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215-3820	М 04	D 08	Y 2013	Amount \$500.00
Full Name of Contributor Columbus Sheet Metal Workers Committee on Political Education	PAC	:	Regis OH1		on Numb	per, if PAC
Street Address 3035 Lamb Ave					Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43219-2367	М 02	D 21	Y 2013	Атоилі \$250.00
Full Name of Contributor Columbus Sheet Metal Workers Committee on Political Education PAC			Registration Number, if PAC OH1053			
Street Address 3035 Lamb Ave	Employer/Occupation/Labor Organization* Form (Cash, Check, etc. Check					
City Columbus	State OH	Zip Code 43219-2367	M 06	D 14	Y 2013	Amount \$500.00
Full Name of Contributor CPM Law PAC Registration Number OH1505			ber, if PAC			
Street Address 366 E Broad St	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215-3819	M 02	D 27	Y 2013	Amount \$250.00

Page Total	\$2,000.00

<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)]