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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	Employ	Employer/Occupation/Labor Organization* Form (C					
City Columbus	State OH	Zip Code 43215-1025	М 02	D 25	Y 2013	. Amount \$500.00	
Full Name of Contributor Registra Columbus Medical Association PAC C00407					tration Number, if PAC		
Street Address 431 E Broad St	Emplo	Employer/Occupation/Labor Organization* Form (Cash, Check					
City Columbus	State OH	Zip Code 43215-3820	M 04	D 08	Y 2013	Amount \$500.00	
Full Name of Contributor Registration Numbreal Workers Committee on Political Education PAC OH1053					per, if PAC		
Street Address 3035 Lamb Ave	Emplo	Employer/Occupation/Labor Organization* Form (Cash, Check, etc., Check					
City Columbus	State OH	Zip Code 43219-2367	M 02	D 21	Y 2013	Amount \$250.00	
Full Name of Contributor Columbus Sheet Metal Workers Committee on Politic	Registration Numb se on Political Education PAC OH1053					ber, if PAC	
Street Address 3035 Lamb Ave	Emplo	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 Registration Number CPM Law PAC OH1505					ber, if PAC		
Street Address 366 E Broad St	Emple	oyer/Occupation/Labor	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
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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)]