Statement of Contributions Received

Prescribed by Secretary of State 2/01

Registration Number, if PAC Form (Cash, Check, etc.)			,						
Registration Number, if PAC State Zip Code M D Y Amount	Name of Committee in Full								
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* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 \$ 50.00