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Statement of Contributions Received

Prescribed by Secretary of State 8/95

Name of Committee in Full Citizins Committee in F Full Name of Contributor Net Contributions From From	erems	W	th M.R.					
ull Name of Contributor				Registration Number, if PAC				
Nh+ Costributions from From	31-E							į į
Street Address	Employer/Occupation/Labor Organization*							Form (Cash, Check, etc.)
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City	State		Zip Code	~	1	D	Y	
Columbus	0	H		0	2	14	OB	
Full Name of Contributor				Re	gistrat	ion Nu	mber, if	PAC
•				- 1				
Street Address	Employer/					Form (Cash, Check, etc.)		
,	Employer/Occupation/Labor Organization*							, , , , , , , , , , , , , , , , , , , ,
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City	State	:	Zip Code	l v	4	D	Υ	Amount
Full Name of Contributor		-		Reg	gistrat	ion Nu	nber, if	PAC
Street Address	Employer/	Occupat	ion/Labor Organization*	i _				Form (Cash, Check, etc.)
Succe rivaless	Occupac	Olu Labor Organization					t offit (Cash, Check, Cic.	
City	State	:	Zip Code	N	4	. D	Y	Amount
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Full Name of Contributor				Re	gistrat	ion Nu	mber, if l	PAC
Street Address	Employer/	Occupat	ion/I abor Organization*					Form (Cash, Check, etc.)
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City	State	:	Zip Code	N	4	D	Y	Amount
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Full Name of Contributor	<u></u>	*		Re	gistrat	ion Nu	mber, if	PAC
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Street Address	Flove/Ossussian Aster Ossesiantian							Form (Cash, Check, etc.)
reet Address Employer/Occupation/Labor Organization*								Torin (Cash, Check, etc.)
City	State	:	Zip Code	N	4	D	ΙΥ	Amount
				1				
Full Name of Contributor	 		<u> </u>	Re	gistra	ion Nu	mber, if	PAC
Street Address	Employer	Occupat	ion/Labor Organization*					Form (Cash, Check, etc.)
Succe Addition	Limpioyer	Оссиран	IOID LADOI OI GAIREAGOR					r om (Cash, Check, etc.)
City	State	:	Zip Code	N	1	D	Y	Amount
]				
Full Name of Contributor	<u></u>		<u> </u>	Re	gistra	tion Nu	mber, if	PAC
Special Address							Form (Cook Charts	
Street Address	Employer/Occupation/Labor Organization*							Form (Cash, Check, etc.)
City	State	•	Zip Code	1	VE.	D	Y	Amount
				1				
			1					

*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 donate 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 \$ 2766.27



