	1	
Page		

Statement of Contributions Received

Prescribed by Secretary of State 3/05

_			-					
Name of Committee in Full								
Franklin County Der	nocratic Lawyers	s Club PAC						
Full Name of Contributor					Registration Number, if PAC			
Contributions from I	Form <u>No. 31-E</u>							
Street Address		Employer/Occi	pation/Labor Organi	ization*				Form (Cash, Check, etc.)
								Variou <u>s</u>
City		State	Zip Code		M	D	Y	Amount
	•				1 0	0 4	1 1	3,145.00
Full Name of Contributor					Registra	tion Nun	iber, if Pa	AC
Street Address		Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
City		State	Zip Code		М	D	Y	Amount
		!				1	1	
Full Name of Contributor			<u>'</u>		Registra	tion Nun	ber, if P	AC
Street Address		Employer/Occi	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
City		State	Zip Code		М	D	Y	Amount
		1	'		1			
Full Name of Contributor		·			Registra	tion Nun	nber, if Pa	AC
Street Address		Employer/Occu	ipation/Labor Organi	ization*				Form (Cash, Check, etc.)
		' -						, ,
City	·	State	Zip Code		М	D	Y	Amount
						l 1	Lι	ŀ
Full Name of Contributor					Registra	tion Nun	nber, if Pa	AC
							,	
Street Address	·	Employer/Occi	ıpation/Labor Organ	ization*		_		Form (Cash, Check, etc.)
			7					, , , , , , , , , , , , , , , , , , , ,
City		State	Zip Code		М	D	Y	Amount
		1			l	l ,	l i	
Full Name of Contributor	*		-1 -		Registra	tion Nun	nber, if Pa	AC
			1		,			
Street Address		Employer/Occi	pation/Labor Organ	ization*				Form (Cash, Check, etc.)
City		State	Zip Code		М	D	Y	Amount
							lı	
Full Name of Contributor					Registra	tìon Nur	nber, if Pa	AC
			1				·	
Street Address		Employer/Occi	pation/Labor Organ	ization*				Form (Cash, Check, etc.)
City		State	Zip Code		М	D	Y	Amount
l ·			'		lι			
Full Name of Contributor		<u> </u>	<u>. I </u>		Registra	tion Nun	nber, if P	AC
			}	ļ			,	
Street Address		Employer/Occi				Form (Cash, Check, etc.)		
City		State	Zip Code		М	D	ΙΥ	Amount
l		1	' "			Li	1	ŀ
								

* 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)]