Statement of Contributions Received



Page Total \$ 3,090

Prescribed by Secretary of State 03/05

Name of Committee in Full FRICARDS of Ben Tyson Full Name of Contributor			٠	_		_	
Full Name of Contributor			Registrati	on Num	her if Pa	<u> = </u>	
James Hagedorn Street Address			· · · · · · · · · · · · · · · · · · ·				
Street Address	Employer/Occupa	tion/Labor Organization	-			Form (Cash, Check, etc.)	
3085 SE Soin + Lucie Blud		•				Check	
City	State	Zip Code	M	D	Υ	Amount	
Stuart,	FL	34997	[ध्रु	٥۴	1 5	Amount \$1000	
Full Name of Contributor			Registrati	on Num	ber, if P/	AC	
Lanzidan Event			<u> </u>				
Zanzibari Event Street Address 740 East Long St	Employer/Occupa	tion/Lahor Organization				Form (Cash, Check, etc.)	
City	State	Zip Code	1 1/6 1	TS 1	V	Amount	
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Full Name of Contributor	10.	1,500	Registrati	on Num			
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Street Address	Employer/Occupa	tion/Labor Organization			-	Form (Cash, Check, etc.)	
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City	State	Zip Code	M	D	Υ	Amount	
Full Name of Contributor	•		Registrati	on Numl	er, if PA	ic	
Street Address	[C					Form (Cash, Check, etc.)	
Street Address Employer/Occupation/Labor Organization						rom (casi, check, ac,)	
City	State	Zip Code	M	D. T	Υį	Amount	
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Full Name of Contributor	1	<u></u>	Registrati	on Numi	ner, if PA	ic -	
Street Address	Employer/Occupat				Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Υ	Amount	
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Full Name of Contributor				Registration Number, if PAC			
Street Address Employer/Occupation/Lahor Organization						Form (Cash, Check, etc.)	
Succe reality	Employer/Occupat	tion/Lanor Organization			:	total (Cast Chara, etc.)	
City	State	Zip Code	M	Dj.	Y	Amount	
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Full Name of Contributor			Registrati	on Numb	er, if PA	C	
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Street Address	Employer/Occupat	tion/Labor Organization	 -			Form (Cash, Check, etc.)	
		- 					
City	State	Zip Code	M	D	ή	Amount	
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Full Name of Contributor Registration Number, if P.					i.C		
Street Address	G., J., 12	yer/Occupation/Labor Organization				Form (Cash, Check, etc.)	
Street Address	r.mpioyer/Occupat	•			The same of the sa		
City	State	Zip Code	M	D.	М	Amount	
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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 payroli deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]