

Statement of Contributions Received

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Prescribed by Secretary of State 2/01

Name of Committee in Full SWEA-EPAC		2012 SEP 26 PM 12:38		Registration Number, if PAC	
Full Name of Contributor OEA-FCPE		Employer/Occupation/Labor Organization* BOARD OF ELECTIONS		Form (Cash, Check, etc.)	
Street Address 225 E Broad		City Columbus		Amount 2,263.35	
State OH		Zip Code 43215		M D Y 09 12 12	
Full Name of Contributor		Registration Number, if PAC		Form (Cash, Check, etc.)	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City		State		Amount	
City		State		Amount	
Full Name of Contributor		Registration Number, if PAC		Form (Cash, Check, etc.)	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City		State		Amount	
City		State		Amount	
Full Name of Contributor		Registration Number, if PAC		Form (Cash, Check, etc.)	
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City		State		Amount	
City		State		Amount	
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City		State		Amount	
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City		State		Amount	
City		State		Amount	

Required for contributions from individuals 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 also appear. [R.C. 3517.10(B)(4)]

Page Total \$ **2263.35**