

## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full			-				
COLUMBUS FIREFIGHTERS UNION	L-67 PAG	C FUND					
					ation Number, if PAC		
Transfer of 3046 individual membersh	ip dues		ľ				
Street Address .		cupation/Labor Organization*				Form (Cash, Check, etc.)	
379 WEST BROAD ST.						CHECK	
City	State	Zip Code	М	D	Y	Amount	
COLUMBUS	101	1 43215	0   5	1   5	1   5	3,046.00	
Full Name of Contributor					nber, if P/		
Street Address	Employer/Oc	cupation/Labor Organization*	•			Form (Cash, Check, etc.)	
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Street Address	Employer/Oc	cupation/Labor Organization*				Form (Cash, Check, etc.)	
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Full Name of Contributor		•	Registra	tion Nun	ber, if PA	iC .	
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Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Amount	
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Full Name of Contributor Registration Number, if PAC						.Ċ	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount	

\* 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)]

Page Total \$ 3,04	6.00
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