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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
AluttoforDublin							
Full Name of Contributor			Registrat	Registration Number, if PAC			
Sarah Saxton							
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)	
8948 Turin Hill Ct						online	
City	State	Zip Code	M	D	Y	Amount	
Dublin	o h	43017	0 9			100.00	
Full Name of Contributor			Registrat	tion Nun	ber, if PA	.C	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor	Registration Number, if Pa				sc		
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Amount	
					1		
Name of Contributor Registration Number, if PAG						AC .	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor			Registra	tion Nun	nber, if PA	AC .	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor	AC						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City	State	Zip Code	M	D 	Y	Amount	
Full Name of Contributor	Registration Number, if PA					ÂC	
Street Address	Employer/Occi	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D 	Y	Amount	
Full Name of Contributor Registration Number, if PA					AC		
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City	State	Zip Code	M 	D	Y	Amount	
		dideta. If contributor is salf a			1.1	6.3	

* 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 \$ 100.00