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Statement of Contributions Received

Prescribed by Secretary of State 3/05

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Name of Committee in Full Royanoldshara Ronablican Club							
Reynoldsburg Republican Club Full Name of Contributor		Registra	Registration Number, if PAC				
Robert & Virginia Cook							
Street Address	Employer/Occi	pation/Labor Organization*				Form (Cash, Check, etc.)	
8170 Priestly Drive						Check	
City	State	Zip Code	М	D	Y	Amount	
Reynoldsburg	OH	43068	0 4	2 9	THE RESERVE OF THE PARTY OF THE	20.00	
Full Name of Contributor			Registra	ition Num	ber, if PA	С	
Contributions from Form 31-E	F10/Occ-	matica /I ahan Organization*				Form (Cosh Chook etc.)	
Street Address	Employer/Occi	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
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city	State	Elp code	''`		•	3,660.00	
Full Name of Contributor			Registra	ation Nun	ber, if PA		
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Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
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Full Name of Contributor			Registra	ition Nur	ber, if PA	С	
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Street Address	Employer/Occi	ipation/Labor Organization*				Form (Cash, Check, etc.)	
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Full Name of Contributor	***************************************	**************************************	Registra	ation Nun	ber, if PA	C	
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Full Name of Contributor			Registra	ation Nun	iber, if PA	i.C	
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Street Address	Employer/Occupation/Labor Organization*					Tom (Cash, Check, cic.)	
City	State	Zip Code	М	D	ΙΥ	Amount	
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Street Address	Employer/Occi	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 \$ 3,680.00