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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full		•••				
Citizens for Yassenoff Full Name of Contributor			Pegistra	tion Num	ber, if PA	C
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Full Name of Contributor			Registra	41011 11111	1001, 11 1 7	
C	E-malayar/Occur	pation/Labor Organization*				Form (Cash, Check, etc.)
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	0	Ta: C 1		1 B	T v	A4
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reet Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)						Form (Cash, Check, etc.)
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	' '	-				
City	State	Zip Code	М	D	Y	Amount
		•	1	1		
	<u> </u>	L				

Page Total \$	100.00

^{*} 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)]