

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full						
Reynoldsburg Republican Club						
Full Name of Contributor			Registration Number, if PAC			
Contributors or \$25 or less						
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.)
						
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City	State	Zip Code	M	D		i
			0 6		1 7	20.00
Full Name of Contributor			Registrati	ion Numbe	r,ifPAC	
Contributors or \$25 or less						
Street Address	Employer/Occup				Form (Cash, Check, etc.)	
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Full Name of Contributor			Registrati	ion Numbe	T, II PAC	
Contributions from Form 31-E						
Street Address	Employer/Occup				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
						5,275.00
Full Name of Contributor		- · · · · · · · · · · · · · · · · · · ·	Registrat	ion Numbe	r ifPAC	0,270.00
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Street Address	Employer/Occup	nation/Labor Organization*				Form (Cash, Check, etc.)
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Full Name of Contributor			Registrat	tion Numb	er if DAC	<u> </u>
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Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)					
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City	State	Zip Code	M	D	Y	Amount

Page Total\$	5,305.00
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^{*} 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)]