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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

V						<u> </u>
Name of Committee in Full						
Walter4Dublin			In .	, ,,		
Full Name of Contributor			Registr	ation Nun	iber, if Pa	AC.
None						
Street Address	Employer/Occe	pation/Labor Organization	on*			Form (Cash, Check, etc.)
City	State	Zip Code	М	D	Y	Amount
Full Name of Contributor			Registr	ation Nun	nber, if Pa	AC .
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Amount
•		<b>,</b> 1	11			
Full Name of Contributor	Il Name of Contributor Registration Number, if P					AC
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Ϋ́	Amount
			11			
Full Name of Contributor			Registr	ation Nun	ber, if Pa	AC .
Street Address	Employer/Oceu	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor			Registra	ation Nun	nber, if Pa	AC
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)		
City	State	Zip Code	Т М	D	Y	Amount
City	State	zip code	"			Amount
Full Name of Contributor Registration Number					iber, if P	\C
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	М	D	Y	Amount
cii,		Zip code	"		'	Amount
Full Name of Contributor	<u> </u>		Registra	ation Nur	ber, if P	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 Registration Number, if P.				ber, if Pa	AC	
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*			Form (Cush, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
		<u> </u>			1	
guired for contributions from individuals over \$100	to statewide and canasal accombly annu	lidatas (Casatalla e a la s	oalf american dea			

\* 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 \$	0.00