## Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

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Full Name of Com				2	1 - Y					Registration	on Num	ber, if P	AC	
Full Name of Cand	GHIJPR idate	HDDU	s Fur L	A TION	18 Furi	MRE				<u> </u>				
Street Address	<i>A</i>						C	ffice Sought				Distric	t	
City	KAIEL	18	CT						<b>S</b> +	ate 12	Zip Cod	<u> </u>		
239 City DAYTE	,N								ОН			4/5	ŹÙ	
Sype of Report			re-Primary	Post	t-Primary		] P	re-General		Post-Gene		X	Annual 20	<u>Y</u> 231
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Amended Report?	Yes !	D No F	Report Electronically F	iled? 🗖 Y	es 🗖 No	Dan	00 E)	etion	λ	1	D			Y
			r: if total contributions						d post-per	ods at one o	election	check l	box 🗆	
No other forms are	required for a	post-prin	nary or post-general pe	riod, if above	statement appli	ies. See R.C. 3	517.1	O(H) for details.						,
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Print Name and Tit	le (Treasurer i	and Deput	ty Treasurer only)	_ <b>f</b> a	Signature						Date			
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Contribution pages			Expendit pa	ges			Othe	7				Total pages_		

## Statement of Other Income Prescribed by Secretary of State 2/01

Page	

Name of Committee in Full			
NEIGHOOKHUEDS FEL DATTON	s Furth	٤	
Full Name  CODE CREDET UNION			Registration Number, if PAC
NEIGHOORHWEDS FOR DAYFON. Full Name  CODE CREDET UNITED  Address  345 W HONNINENT SI  City  DAMON	Type LU		M D Y Amount  1 2 3 1 1 3 111.57
City	Stake OH	Zip Code 4540Z	Form (Cash, Check, etc.)
Full Name	<u> </u>		Registration Number, if PAC
Address	Type*		M D Y Amount
City	RE State	Zip Code	Form (Cash, Check, etc.)
Full Name	OH		Registration Number, if PAC
Address	Type* RE		M D Y Amount
City	Stake OH	Zip Code	Form (Cash, Check, etc.)
Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
City	State OH	Zip Code	Form (Cash, Check, etc.)
Full Name	1 011	<u> </u>	Registration Number, if PAC
Address	Туре*		M D Y Amount
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Full Name	ОН		Registration Number, if PAC
A 11	7.1		
Address	RE _		M D Y Amount
City	Stake OH	Zip Code	Form (Cash, Check, etc.)
Full Name			Registration Number, if PAC
Address	Type*		M D Y Amount
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Full Name	<u> </u>	1	Registration Number, if PAC
Addr <b>e</b> ss	Туре'		M D Y Amount
City	RE Stake _	Zip Code	Form (Cash, Check, etc.)
	OH		

Page Total \$ 172 57

<sup>\*</sup> Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received, IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.