



# Statement of Contributions Received

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Citizens for Jolley				
Full Name of Contributor Ian Polster			Registration Number, if PAC	
Street Address 2003 Timberline Tr	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online	
City Springfield	State OH	Zip Code 45503	Date (MM/DD/YYYY) 02/16/2019	Amount 80.00
Full Name of Contributor Carolyn LaMacchia			Registration Number, if PAC	
Street Address 315 Jackson St	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online	
City Dayton	State OH	Zip Code 45410	Date (MM/DD/YYYY) 02/17/2019	Amount 50.00
Full Name of Contributor James Wagner			Registration Number, if PAC	
Street Address 4897 East Walnut Street	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 02/22/2019	Amount 20.00
Full Name of Contributor Bill Hedrick			Registration Number, if PAC	
Street Address 535 W 1st Ave	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 02/23/2019	Amount 100.00
Full Name of Contributor David Donofrio			Registration Number, if PAC	
Street Address 298 Carilla Ln	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online	
City Columbus	State OH	Zip Code 43228	Date (MM/DD/YYYY) 02/25/2019	Amount 50.00

\*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 also appear. [R.C. 3517.10(B)(4)]