



Statement of Contributions Received

Form 31-A  
ORC 3517.10

Full Name of Committee Citizens for Quality Schools				
Full Name of Contributor Karen Hammond			Registration Number, if PAC	
Street Address 4432 Wrens Nest Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City New Albany	State OH	Zip Code 43054	Date (MM/DD/YYYY) 02/02/2018	Amount 25.00
Full Name of Contributor Corie Frasson			Registration Number, if PAC	
Street Address 540 Waterbury Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 02/02/2018	Amount 55.00
Full Name of Contributor Laura Hayes Thomas			Registration Number, if PAC	
Street Address 10156 Wellington Dr NW		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Pickerington	State OH	Zip Code 43147	Date (MM/DD/YYYY) 02/02/2018	Amount 87.00
Full Name of Contributor Marcie Aiello			Registration Number, if PAC	
Street Address 693 Stag Place		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 02/02/2018	Amount 100.00
Full Name of Contributor Meredith Miller			Registration Number, if PAC	
Street Address 333 Woodside Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Johnstown	State OH	Zip Code 43031	Date (MM/DD/YYYY) 02/02/2018	Amount 54.00

\*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)]