



Statement of Contributions Received

Campaign Finance | (614) 466-3111
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Form 31-A
ORC 3517.10

Full Name of Committee Peters Improving Westerville				
Full Name of Contributor Lee Peters			Registration Number, if PAC	
Street Address 71 Belpre Place W		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Westerville	State OH	Zip Code 43081		Amount 100.00
Full Name of Contributor Edward D Helvey			Registration Number, if PAC	
Street Address 410 Ashford Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Westerville	State OH	Zip Code 43082		Amount 35.00
Full Name of Contributor Marian Harris			Registration Number, if PAC	
Street Address 5145 Holbrook Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43232		Amount 25.00
Full Name of Contributor Carolee Luberto			Registration Number, if PAC	
Street Address 387 Delaware Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Westerville	State OH	Zip Code 43081		Amount 25.00
Full Name of Contributor David Martin			Registration Number, if PAC	
Street Address 28 Nicole Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Westerville	State OH	Zip Code 43081		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)]