



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Motil for City Council				
Full Name of Contributor Mary Smith			Registration Number, if PAC	
Street Address 612 Liberty Lane		Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) cash
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 04/22/2019	Amount 20.00
Full Name of Contributor Martin Yant			Registration Number, if PAC	
Street Address 1000 Urlin Avenue		Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) cash
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 04/20/2019	Amount 10.00
Full Name of Contributor Greg Maynard			Registration Number, if PAC	
Street Address 2095 Iuka Avenue		Employer/Occupation/Labor Organization* Self Employed/Landscaper		Form (Cash, Check, etc.) cash
City Columbus	State OH	Zip Code 43201	Date (MM/DD/YYYY) 04/21/2019	Amount 90.00
Full Name of Contributor Judith Boyland			Registration Number, if PAC	
Street Address 2655 Glenmawr Avenue		Employer/Occupation/Labor Organization* retired		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43202	Date (MM/DD/YYYY) 04/20/2019	Amount 25.00
Full Name of Contributor Sean G. Cleary			Registration Number, if PAC	
Street Address 206 East Hocking Street		Employer/Occupation/Labor Organization* Lanfair/Administrator		Form (Cash, Check, etc.) check
City Canal Winchester	State OH	Zip Code 43110	Date (MM/DD/YYYY) 04/20/2019	Amount 25.00

*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)]