



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Bonnie Michael				
Full Name of Contributor Marianne E Mottley			Registration Number, if PAC	
Street Address 137 St Julien St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 09/15/209	Amount 500.00
Full Name of Contributor Rosemary E Pomeroy			Registration Number, if PAC	
Street Address 273 Heischman Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 09/18/2019	Amount 75.00
Full Name of Contributor Bernice J Cooper			Registration Number, if PAC	
Street Address 6353 Mar Min Ct		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 09/18/2019	Amount 25.00
Full Name of Contributor Michael P Gilliland			Registration Number, if PAC	
Street Address 6563 Masfield St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 09/16/2019	Amount 50.00
Full Name of Contributor Pamela R Esch			Registration Number, if PAC	
Street Address 350 Medick Way		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 09/19/2019	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)]

Page Total 675.00