



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Citizens for Bonnie Michael				
Full Name of Contributor Janyce C Katz			Registration Number, if PAC	
Street Address 1246 Brookwood Pl		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43209	Date (MM/DD/YYYY) 05/02/2019	Amount 50.00
Full Name of Contributor Ralph J Kownacki			Registration Number, if PAC	
Street Address 4138 Bishopsgate Way		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Powell	State OH	Zip Code 43065	Date (MM/DD/YYYY) 05/02/2019	Amount 50.00
Full Name of Contributor Virginia M McDougale			Registration Number, if PAC	
Street Address 5935 N High St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 05/06/2019	Amount 20.00
Full Name of Contributor Steven Burk			Registration Number, if PAC	
Street Address 6840 Bowerman West		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 05/07/2019	Amount 25.00
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) 05/06/2019	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)]