



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Gahanna Residents Improving Tomorrow				
Full Name of Contributor Tom & Patti Liskay			Registration Number, if PAC	
Street Address 457 Tresham Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 04/06/2019	Amount 50.00
Full Name of Contributor Venus Roby			Registration Number, if PAC	
Street Address 185 Stonegate Circle		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 04/07/2019	Amount 50.00
Full Name of Contributor Michael Carder			Registration Number, if PAC	
Street Address 8150 Sterling Ct		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Mentor	State OH	Zip Code 44060	Date (MM/DD/YYYY) 04/09/2019	Amount 3,000.00
Full Name of Contributor John Gallagher			Registration Number, if PAC	
Street Address 8543 Gosling Way		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 04/09/2019	Amount 40.00
Full Name of Contributor Contributions from form No. 31-E			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY) 02/20/2019	Amount 982.00

*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)]