



## **Statement of Contributions Received**

Form 31-A

ORC 3517.10

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Registration Numb			per, if PAC	
Pa	olice			
Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
LABOR ORLANIZATION			CHECK	
ate	Zip Code Date (MM/DD/YYYY)		Amount	
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ate	Zip Code	Date (MM/DI	D/YYYY)	Amount
1	43230	10.91	4-0018	350.00
Registration Numb		er, if PAC		
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Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
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\*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 \$	3,150	
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