



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Houk For Council				
Full Name of Contributor Jennifer L. Johnson			Registration Number, if PAC	
Street Address 6100 Grant Run Place		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 09/11/17	Amount 50.00
Full Name of Contributor Mark E. Sigrist			Registration Number, if PAC	
Street Address 1180 Regency Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43123	Date (MM/DD/YYYY) 9/17/17	Amount 30.00
Full Name of Contributor Robert K. Whittier			Registration Number, if PAC	
Street Address 3004 Crabapple Place		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 09/17/17	Amount 25.00
Full Name of Contributor Lisa A. Ziegler			Registration Number, if PAC	
Street Address 6198 Winnebago St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 09/17/17	Amount 500.00
Full Name of Contributor Steven R. Robinette			Registration Number, if PAC	
Street Address 1166 Pinnacle Club Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 09/17/17	Amount 100.00

\*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 705.00