



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee			· · · · · · · · · · · · · · · · · · ·		
Conley For Council					
Full Name of Contributor Registration Number					er, if PAC
Kimberly Kellogg					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
457 Landings Loop W					Check
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Westerville	ОН	43082		08/23/2019	50.00
Full Name of Contributor	· · · · · · · · · · · · · · · · · · ·			Registration Number	er, if PAC
James Davis					
Street Address	Employ	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
447 Six Pence Circle	Check				
City	State	Zip Code	Date (MM/D	D/YYY)	Amount
Westerville	ОН	43081		08/23/2019	50.00
Full Name of Contributor	Registration Number				er, if PAC
Lisa Aucoin					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
507 Cherrington Court					Check
City	State	Zip Code	Date (MM/D	D/YYY)	Amount
Westerville	ОН	43081		08/23/2019	50.00
Full Name of Contributor	***			Registration Number	er, if PAC
Christine A Herbert					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
731 Paddlecreek Drive	Check				
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Westerville	ОН	43082		08/23/2019	50.00
Full Name of Contributor	Registration Numb				er, if PAC
Scott Ebbrecht					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
392 Inglewood Drive					Check
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Westerville	ОН	43081		08/23/2019	50.00

	
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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)]