



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Chris Amorose Groomes for Dublin				
Full Name of Contributor William G. Guy			Registration Number, If PAC	
Street Address 2094 Edgemont Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 08/21/2019	Amount \$100.00 ✓
Full Name of Contributor Gregory J. Butler			Registration Number, If PAC	
Street Address 5714 Haddington Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Dublin	State OH	Zip Code 43017	Date (MM/DD/YYYY) 08/22/2019	Amount \$250.00 ✓
Full Name of Contributor Robert W. Vanhooose			Registration Number, If PAC	
Street Address 104 Country Club Court		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Ashland	State KY	Zip Code 41101	Date (MM/DD/YYYY) 08/25/2019	Amount \$250.00 ✓
Full Name of Contributor Gary L. Schottenstein			Registration Number, If PAC	
Street Address 270 El Bravo Way		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Palm Beach	State FL	Zip Code 33480	Date (MM/DD/YYYY) 08/26/2019	Amount \$250 ✓
Full Name of Contributor Patrick M. Grabill			Registration Number, If PAC	
Street Address 2970 Arbuckle Road NW		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City London	State OH	Zip Code 43140	Date (MM/DD/YYYY) 08/29/2019	Amount \$250.00 ✓

*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)]