



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Committee to Elect Aileen Wagner				
Full Name of Contributor Clark Munson			Registration Number, if PAC	
Street Address 908 Greenfield Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Pittsburgh	State PA	Zip Code 15217	Date (MM/DD/YYYY) 05/02/2019	Amount 25.00
Full Name of Contributor Kathleen Kehoe			Registration Number, if PAC	
Street Address 584 Landings Blvd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Ann Arbor	State MI	Zip Code 48103	Date (MM/DD/YYYY) 08/05/2019	Amount 25.00
Full Name of Contributor Zola Maddison			Registration Number, if PAC	
Street Address 2116 N. 46th St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Seattle	State WA	Zip Code 98103	Date (MM/DD/YYYY) 08/05/2019	Amount 100.00
Full Name of Contributor Nancy Tyger			Registration Number, if PAC	
Street Address 620 9th Ave, Patterson Heights		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Beaver Falls	State PA	Zip Code 15010	Date (MM/DD/YYYY) 08/05/2019	Amount 100.00
Full Name of Contributor Debbie Koenig			Registration Number, if PAC	
Street Address 41-42 50th Street, Apt 6E		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Woodside	State NY	Zip Code 11377	Date (MM/DD/YYYY) 08/14/2019	Amount 25.00

*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)]