



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Laura Kunze for Sharon Township				
Full Name of Contributor Robert Marshall			Registration Number, if PAC	
Street Address 6964 N River Road	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Dresden	State OH	Zip Code 43821	Date (MM/DD/YYYY) 10/20/2017	Amount \$100.00
Full Name of Contributor Darcy Blessing			Registration Number, if PAC	
Street Address 203 Fairdale Ave	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 10/19/2017	Amount \$100.00
Full Name of Contributor Adem Vllasi			Registration Number, if PAC	
Street Address 8188 Lake Bluff Ct	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43235	Date (MM/DD/YYYY) 10/22/2017	Amount \$200.00
Full Name of Contributor Jim Hughes			Registration Number, if PAC	
Street Address 52 E Gay Street	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 10/23/2017	Amount \$150.00
Full Name of Contributor Erik Yassenoff			Registration Number, if PAC	
Street Address 1990 Hampshire Rd	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/23/2017	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)]