



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Mike Coolman for City Council				
Full Name of Contributor John M. Bauers			Registration Number, if PAC	
Street Address 11 N. High St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Canal Winchester	State OH	Zip Code 43110	Date (MM/DD/YYYY) 11-01-17	Amount \$200.00
Full Name of Contributor Michael T. Hummel			Registration Number, if PAC	
Street Address 9400 Bowen Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Canal Winchester	State OH	Zip Code 43110	Date (MM/DD/YYYY) 11-01-17	Amount \$250.00
Full Name of Contributor Nicole Spencer			Registration Number, if PAC	
Street Address 6045 Northbend Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Canal Winchester	State OH	Zip Code 43110	Date (MM/DD/YYYY) 11-07-17	Amount \$50.00
Full Name of Contributor Alice McDorman			Registration Number, if PAC	
Street Address 6500 Lithopolis Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Canal Winchester	State OH	Zip Code 43110	Date (MM/DD/YYYY) 11-07-17	Amount \$200.00
Full Name of Contributor Richard Goodin			Registration Number, if PAC	
Street Address 6219 Meriden Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Canal Winchester	State OH	Zip Code 43110	Date (MM/DD/YYYY) 11-07-17	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)]