



# Statement of Contributions Received

Form 31-A  
ORC 3517.10

<b>Full Name of Committee</b> Motil for City Council				
Full Name of Contributor Ken Goodson			Registration Number, if PAC	
Street Address 1459 Bryden Road	Employer/Occupation/Labor Organization* Dynamix Engineering/Engineer		Form (Cash, Check, etc.) credit card	
City Columbus	State OH	Zip Code 43205	Date (MM/DD/YYYY) 07/16/2019	Amount 25.00
Full Name of Contributor James Calhoun			Registration Number, if PAC	
Street Address 373 Walhalla Road	Employer/Occupation/Labor Organization* Self/Architect		Form (Cash, Check, etc.) credit card	
City Columbus	State OH	Zip Code 43202	Date (MM/DD/YYYY) 07/27/2019	Amount 30.00
Full Name of Contributor Ed Efsic			Registration Number, if PAC	
Street Address 2032 Indianola Ave.	Employer/Occupation/Labor Organization* retired		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43201	Date (MM/DD/YYYY) 07/23/2019	Amount 25.00
Full Name of Contributor Peter Corbett			Registration Number, if PAC	
Street Address 14682 N. 100th Street	Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) check	
City Scottsdale	State AZ	Zip Code 85620	Date (MM/DD/YYYY) 07/28/2019	Amount 25.00
Full Name of Contributor Jonathan Marshall			Registration Number, if PAC	
Street Address 723 West Oakland Avenue	Employer/Occupation/Labor Organization* self/attorney		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43201	Date (MM/DD/YYYY) 08/03/2019	Amount 75.00

\*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)]

Page Total 180.00