



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Ted Berry				
Full Name of Contributor Stivers for Congres			Registration Number, if PAC	
Street Address 4679 Winterset Drive		Employer/Occupation/Labor Organization* Campaign Committee		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43220	Date (MM/DD/YYYY) 10/27/17	Amount 350.00
Full Name of Contributor BIA Build PAC of Central Ohio			Registration Number, if PAC	
Street Address 495 Executive Campus Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Westerville	State OH	Zip Code 43082	Date (MM/DD/YYYY) 11/3/17	Amount 500.00
Full Name of Contributor Lisa Kelley			Registration Number, if PAC	
Street Address 2712 Bexley Park Drive		Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43209	Date (MM/DD/YYYY) 11/4/17	Amount 250.00
Full Name of Contributor Kristofer Kuskowski			Registration Number, if PAC	
Street Address 2500 Dover Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43209	Date (MM/DD/YYYY) 11/3/17	Amount 200.00
Full Name of Contributor Kara McGinn			Registration Number, if PAC	
Street Address 190 South High Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 11/2/17	Amount 200.00

*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 1,500.00