



# Statement of Contributions Received

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Committee to Elect Aileen Wagner				
Full Name of Contributor Total contributions from Form no. 31-E			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	Date (MM/DD/YYYY) 09/18/2019	Amount 210.00
Full Name of Contributor Total contributions from Form no. 31-E			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	Date (MM/DD/YYYY) 10/06/2019	Amount 110.00
Full Name of Contributor The Matriots c/o Perfect Balance CPA			Registration Number, if PAC OH1761	
Street Address 2470 E Main St	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09/25/2019	Amount 750.00
Full Name of Contributor Wright for Westerville			Registration Number, if PAC	
Street Address PO Box 2451	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Westerville	State OH	Zip Code 43086	Date (MM/DD/YYYY) 07/11/2019	Amount 50.00
Full Name of Contributor Marya Kolman			Registration Number, if PAC	
Street Address 589 Locust Ct	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Westerville	State OH	Zip Code 43082	Date (MM/DD/YYYY) 10/15/2019	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)]

Page Total \$1145.00