



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens to Elect Ganoom				
Full Name of Contributor UA 4 Accountability			Registration Number, if PAC	
Street Address 1916 Harwitch Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43221	Date (MM/DD/YYYY) 12/30/2016	Amount 250.00
Full Name of Contributor UA 4 Accountability			Registration Number, if PAC	
Street Address 1916 Harwitch Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43221	Date (MM/DD/YYYY) 01/10/2017	Amount 250.00
Full Name of Contributor Clark Anderson			Registration Number, if PAC	
Street Address 406 W 6th Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43201	Date (MM/DD/YYYY) 04/11/2017	Amount 250.00
Full Name of Contributor Carole Anderson			Registration Number, if PAC	
Street Address 2536 Canterbury Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43221	Date (MM/DD/YYYY) 04/11/2017	Amount 250.00
Full Name of Contributor Robert Crotty			Registration Number, if PAC	
Street Address 2450 Bloxom St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 08/18/2017	Amount 250.00

*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 1250.00