



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Aultman for Schools					
Full Name of Contributor Jennifer Murray				Registration Number, if PAC	
Street Address 8910 Burntoak Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Electronic	
City St. Louis	State MO	Zip Code 63123	Date (MM/DD/YYYY) 06/30/2019	Amount \$100.00	
Full Name of Contributor Stephanie McManus				Registration Number, if PAC	
Street Address 2239 Horns Hill Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Electronic	
City Newark	State OH	Zip Code 43055	Date (MM/DD/YYYY) 07/22/2019	Amount \$25.00	
Full Name of Contributor Stephanie McManus				Registration Number, if PAC	
Street Address 2239 Horns Hill Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Electronic	
City Newark	State OH	Zip Code 43055	Date (MM/DD/YYYY) 07/22/2019	Amount \$25.00	
Full Name of Contributor Richard L. Leavy				Registration Number, if PAC	
Street Address 124 Nidle Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 07/01/2019	Amount \$50.00	
Full Name of Contributor The Patriots-PAC OH1761				Registration Number, if PAC OH 1761	
Street Address Go Perfect Balance CPA 2470 E. Main St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	Date (MM/DD/YYYY) 10/01/2019	Amount \$400.00	

*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)]