



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Quality Schools				
Full Name of Contributor Kelly Overmyer			Registration Number, if PAC	
Street Address 1456 Elmwood Ave, Apt B		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 10/25/2018	Amount 2.00
Full Name of Contributor Jill Elliott			Registration Number, if PAC	
Street Address 140 Kitdare Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Delaware	State OH	Zip Code 43015	Date (MM/DD/YYYY) 10/25/2018	Amount 20.00
Full Name of Contributor Aaron Winner			Registration Number, if PAC	
Street Address 7641 Hutton St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Blacklick	State OH	Zip Code 43004	Date (MM/DD/YYYY) 10/25/2018	Amount 10.00
Full Name of Contributor Linda Green			Registration Number, if PAC	
Street Address 3294 Aronimink Ct		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Pickerington	State OH	Zip Code 43147	Date (MM/DD/YYYY) 10/25/2018	Amount 10.00
Full Name of Contributor Sarah Hensley			Registration Number, if PAC	
Street Address 322 Rocky Springs Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Blacklick	State OH	Zip Code 43004	Date (MM/DD/YYYY) 10/25/2018	Amount 4.00

*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)]