31-A
R.C. 3517.10

FOR PAPER FILING ONLY
Statement of Contributions Received

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FRANKLIN COUNTY BOARD OF ELECTIONS

Name of Committee in Full

Full Name of Contributor	Registration Number, if PAC							
PROS Consulting								
Street Address	**Employer/Occupation/Labor Organization***							**Form (Cash, Check, etc.)**
201 S. Capitol Ave								
City	**State**	**Zip Code**	**M**	**D**	**Y**			**Amount**
Indianapolis	~~OH~~ IN	46225	0	4	1	4		1,000.00
Full Name of Contributor	**Registration Number, if PAC**							
Westerville Senior Association Inc								
Street Address	**Employer/Occupation/Labor Organization***							**Form (Cash, Check, etc.)**
764 Collingwood Dr								Check
City	**State**	**Zip Code**	**M**	**D**	**Y**			**Amount**
Westerville	OH	43081	0	7	2	9	1 4	5,000.00
Full Name of Contributor	**Registration Number, if PAC**							
Nationwide Children's Hospital								
Street Address	**Employer/Occupation/Labor Organization***							**Form (Cash, Check, etc.)**
700 Children's Drive								Check
City	**State**	**Zip Code**	**M**	**D**	**Y**			**Amount**
Columbus	OH	43205	0	6	0	6	1 4	5,000.00
Full Name of Contributor	**Registration Number, if PAC**							
POD, LLC								
Street Address	**Employer/Occupation/Labor Organization***							**Form (Cash, Check, etc.)**
100 Northwoods Blvd								
City	**State**	**Zip Code**	**M**	**D**	**Y**			**Amount**
Columbus	OH	43235	0	3	1	1 4		3,000.00
Full Name of Contributor	**Registration Number, if PAC**							
Williams Associates Architects, Ltd								
Street Address	**Employer/Occupation/Labor Organization***							**Form (Cash, Check, etc.)**
500 Park Blvd								Check
City	**State**	**Zip Code**	**M**	**D**	**Y**			**Amount**
Itasca	~~OH~~ IL	60143	0	6	2	8	1 4	1,000.00
Full Name of Contributor	**Registration Number, if PAC**							
Meyer + Associates Architecture								
Street Address	**Employer/Occupation/Labor Organization***							**Form (Cash, Check, etc.)**
232 N. 3rd St #500								Check
City	**State**	**Zip Code**	**M**	**D**	**Y**			**Amount**
Columbus	OH	43215	0	4	2	6	1 4	5,000.00
Full Name of Contributor	**Registration Number, if PAC**							
Westerville Amateur Soccer Association								
Street Address	**Employer/Occupation/Labor Organization***							**Form (Cash, Check, etc.)**
PO BOX 2484								check
City	**State**	**Zip Code**	**M**	**D**	**Y**			**Amount**
Westerville	OH	43086	0	4	1	0	1 4	10,000.00
Full Name of Contributor	**Registration Number, if PAC**							
Street Address	**Employer/Occupation/Labor Organization***							**Form (Cash, Check, etc.)**
City	**State**	**Zip Code**	**M**	**D**	**Y**			**Amount**
	OH							

* 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 $: 30,000.00