



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

|   |                    |   |  |   |  |
|---|--------------------|---|--|---|--|
| Full Name of Committee<br><b>STEP FOR HILLIARD</b>    |                    |   |  |   |  |
| Full Name of Contributor<br><b>JOSHUA GREENBERG</b>   |                    |   |  | Registration Number, if PAC<br><b>N/A</b> |  |
| Street Address<br><b>36 S. AEDMORE RD.</b>            |                    | Employer/Occupation/Labor Organization*<br><b>BROAD STREET CAPITAL OWNER</b>        |  | Form (Cash, Check, etc.)<br><b>CHECK</b>  |  |
| City<br><b>COLUMBUS</b>                               | State<br><b>OH</b> | Zip Code<br><b>43209</b>  | Date (MM/DD/YYYY)<br><b>07/01/2019</b> | Amount<br><b>\$50-</b>                    |  |
| Full Name of Contributor<br><b>JIM HAIN</b>           |                    |   |  | Registration Number, if PAC<br><b>N/A</b> |  |
| Street Address<br><b>4952 BROWN FARMS DR HILLIARD</b> |                    | Employer/Occupation/Labor Organization*<br><b>RETIRED</b>                           |  | Form (Cash, Check, etc.)<br><b>CHECK</b>  |  |
| City<br><b>HILLIARD</b>                               | State<br><b>OH</b> | Zip Code<br><b>43026</b>  | Date (MM/DD/YYYY)<br><b>07/06/2019</b> | Amount<br><b>\$100-</b>                   |  |
| Full Name of Contributor<br><b>SAM CHICKERELLA</b>    |                    |   |  | Registration Number, if PAC<br><b>N/A</b> |  |
| Street Address<br><b>8440 CLARINGTON CT</b>           |                    | Employer/Occupation/Labor Organization*<br><b>BLUESTONE WEALTH PARTNERS BROKER</b>  |  | Form (Cash, Check, etc.)<br><b>CHECK</b>  |  |
| City<br><b>POWELL</b>                                 | State<br><b>OH</b> | Zip Code<br><b>43065</b>  | Date (MM/DD/YYYY)<br><b>07/03/2019</b> | Amount<br><b>\$100-</b>                   |  |
| Full Name of Contributor<br><b>BILL COTTRELL</b>      |                    |   |  | Registration Number, if PAC<br><b>N/A</b> |  |
| Street Address<br><b>3493 SCIOTO RUN BLVD</b>         |                    | Employer/Occupation/Labor Organization*<br><b>RETIRED</b>                           |  | Form (Cash, Check, etc.)<br><b>CHECK</b>  |  |
| City<br><b>HILLIARD</b>                               | State<br><b>OH</b> | Zip Code<br><b>43026</b>  | Date (MM/DD/YYYY)<br><b>07/05/2019</b> | Amount<br><b>\$100-</b>                   |  |
| Full Name of Contributor<br><b>MIKE IRWIN</b>         |                    |   |  | Registration Number, if PAC<br><b>N/A</b> |  |
| Street Address<br><b>PO BOX 368</b>                   |                    | Employer/Occupation/Labor Organization*<br><b>IRWIN INVESTMENT PROPERTIES OWNER</b> |  | Form (Cash, Check, etc.)<br><b>CHECK</b>  |  |
| City<br><b>MILLESPORT</b>                             | State<br><b>OH</b> | Zip Code<br><b>43042</b>  | Date (MM/DD/YYYY)<br><b>07-10-2019</b> | Amount<br><b>50-</b>                      |  |

\*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 **\$400-**