



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Citizens for Quality Schools				
Full Name of Contributor Elizabeth Squillace			Registration Number, if PAC	
Street Address 282 Olentangy St	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43202	Date (MM/DD/YYYY) 05/01/2018	Amount 70.00
Full Name of Contributor Kelli Sprosty			Registration Number, if PAC	
Street Address 6528 Cedar Brook Dr	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City New Albany	State OH	Zip Code 43054	Date (MM/DD/YYYY) 05/01/2018	Amount 40.00
Full Name of Contributor Dawn Stanforth			Registration Number, if PAC	
Street Address 4793 Crazy Horse Ln	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 05/01/2018	Amount 70.00
Full Name of Contributor Heidi Beck			Registration Number, if PAC	
Street Address 457 Park Overlook Dr	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 05/01/2018	Amount 70.00
Full Name of Contributor Tamara Huyghe			Registration Number, if PAC	
Street Address 7953 Windrift Pl	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 05/01/2018	Amount 80.00

*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)]