



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Citizens for Quality Schools				
Full Name of Contributor Lynzee Waddle			Registration Number, if PAC	
Street Address 3591 Pamela Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43230	Date (MM/DD/YYYY) 03/20/2018	Amount 4.00
Full Name of Contributor Tracie Weaver			Registration Number, if PAC	
Street Address 1588 Wilhoit Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Lewis Center	State OH	Zip Code 43035	Date (MM/DD/YYYY) 03/20/2018	Amount 4.00
Full Name of Contributor Michelle White			Registration Number, if PAC	
Street Address 7424 Harbour Town Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Pickerington	State OH	Zip Code 43147	Date (MM/DD/YYYY) 03/20/2018	Amount 20.00
Full Name of Contributor Sue Wieging			Registration Number, if PAC	
Street Address 225 Farmwood Pl.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 03/20/2018	Amount 10.00
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) 03/20/2018	Amount 10.00

*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)]