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## **Statement of Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee						
Citizens For Robinette						
Full Name of Contributor				Registration Number, if PAC		
Stave & Elizabeth Showalter						
Street Address	T	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
1203 Pinnack Club Dr					Check	
City	State	Zip Code	Date (MM/DI	A	Amount	
Grove City	OH _	45601	0212	1/19	\$1000	
Full Name of Contributor		Registration Num			er, if PAC	
Citizens For Cheryl G	nossa	$\sim$			İ	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
4381 Prestix Lane					Check	
City	State	Zip Code	Date (MM/DI		Amount	
Hilliara	어	43026	02/0	9/19	\$ 12,00000	
· ·				Registration Numb	er, if PAC	
Kirk Wallace						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
1194 Pinnade Club Dt					\$100000 Check	
City	State	Zip Code	Date (MM/DI		Amount OT	
GroveCHy	こと	43123	02/2	1/19	\$1,000 00	
Full Name of Contributor	of Contributor Regi				er, if PAC	
John Dubos? Lisa?	Dubos					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
1048 Pinnacle Club Dr					cash	
City	State	Zip Code	Date (MM/DI		Amount OTO	
Grove City	OH _	43123	03/0	4/19	\$2,50000	
				Registration Numb	Registration Number, if PAC	
Jeffley & Ruth Pearson Street Address 8484 Munitions Ct						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
					Check	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Galloway	OH I	43119			\$ 500°°	

<sup>\*</sup>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)]