



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Citizens for Quality Schools				
Full Name of Contributor Christiane Swisher			Registration Number, if PAC	
Street Address 2487 Daily Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43232	Date (MM/DD/YYYY) 04/19/2018	Amount 200.00
Full Name of Contributor Amber Mocarski			Registration Number, if PAC	
Street Address 443 Josaphat Way		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43213	Date (MM/DD/YYYY) 04/19/2018	Amount 60.00
Full Name of Contributor Sarah Hensley			Registration Number, if PAC	
Street Address 322 Rocky Springs Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Blacklick	State OH	Zip Code 43004	Date (MM/DD/YYYY) 04/19/2018	Amount 50.00
Full Name of Contributor Jennifer Palguta			Registration Number, if PAC	
Street Address 2687 Northmont Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Blacklick	State OH	Zip Code 43004	Date (MM/DD/YYYY) 04/19/2018	Amount 80.00
Full Name of Contributor Pamela Cook			Registration Number, if PAC	
Street Address 141 Bellebrooke Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Pataskala	State OH	Zip Code 43062	Date (MM/DD/YYYY) 04/19/2018	Amount 75.00

*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)]