



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Gahanna Residents Improving Tomorrow				
Full Name of Contributor Citizens For A Stronger Gahanna			Registration Number, if PAC	
Street Address 4511 Shady Blossom Ln		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 02/15/2019	Amount 2,132.19
Full Name of Contributor Ann Flaherty			Registration Number, if PAC	
Street Address 546 Springwood Lake Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 02/17/2019	Amount 30.00
Full Name of Contributor John & Kirsten Hicks			Registration Number, if PAC	
Street Address 381 Helmbright Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 02/19/2019	Amount 250.00
Full Name of Contributor Austin Matney			Registration Number, if PAC	
Street Address 6370 Astor Place #308		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City New Albany	State OH	Zip Code 43054	Date (MM/DD/YYYY) 02/19/2019	Amount 1.00
Full Name of Contributor Robert Poe			Registration Number, if PAC	
Street Address 499 Davenport Ln		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 02/21/2019	Amount 50.00

*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)]