



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Tricia Sprankle				
Full Name of Contributor Aarica Burwell			Registration Number, if PAC	
Street Address 1045 LECTRIC LANE		Employer/Occupation/Labor Organization* student		Form (Cash, Check, etc.) PayPal
City Zanesville	State OH	Zip Code	Date (MM/DD/YYYY) 09/30/2019	Amount 15.00
Full Name of Contributor John Fockler			Registration Number, if PAC	
Street Address 188 Stadium Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Boardman	State OH	Zip Code	Date (MM/DD/YYYY) 09/30/19	Amount 15.00
Full Name of Contributor Robert Coogan			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Cincinnati	State OH	Zip Code	Date (MM/DD/YYYY) 09/30/2019	Amount 20.00
Full Name of Contributor Ann Leech			Registration Number, if PAC	
Street Address 415 Pinebluff		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Loveland	State OH	Zip Code	Date (MM/DD/YYYY) 09/30/2019	Amount 100.00
Full Name of Contributor Jonathan Gentsch			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City New Philadelphia	State OH	Zip Code	Date (MM/DD/YYYY) 10/01/2019	Amount 100.00

*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)]