



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Ted Berry				
Full Name of Contributor Jim Hale			Registration Number, if PAC	
Street Address 4215 Arbutus Ave.		Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) Cash
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 9/22/2017	Amount 50.00
Full Name of Contributor Martin Savko			Registration Number, if PAC	
Street Address 675 Lindsey Marie Lane		Employer/Occupation/Labor Organization* Savko Inc.		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43235	Date (MM/DD/YYYY) 09/22/2017	Amount 500.00
Full Name of Contributor Mark Catalano			Registration Number, if PAC	
Street Address 1732 Essex Road		Employer/Occupation/Labor Organization* Self employed		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/04/2017	Amount 250.00
Full Name of Contributor Committee for Jim Hughes			Registration Number, if PAC	
Street Address 52. East Gay Street		Employer/Occupation/Labor Organization* State Representative		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 10/03/2017	Amount 250.00
Full Name of Contributor Twinkle Schottke			Registration Number, if PAC	
Street Address 4912 McNulty Street		Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) check
City Grove City, Ohio	State OH	Zip Code 43123	Date (MM/DD/YYYY) 10/15/2017	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)]