



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Committee to Elect Aileen Wagner				
Full Name of Contributor Maria Bernstein			Registration Number, if PAC	
Street Address 662 65th Street	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online	
City Oakland	State CA	Zip Code 94609	Date (MM/DD/YYYY) 10/27/2019	Amount 100.00
Full Name of Contributor Mark Owens			Registration Number, if PAC	
Street Address 3927 Saddleridge Cir	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online	
City Dayton	State OH	Zip Code 45424	Date (MM/DD/YYYY) 11/02/2019	Amount 125.00
Full Name of Contributor Henry Lefkowitz			Registration Number, if PAC	
Street Address 7004 Boxford Road	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online	
City Baltimore	State MD	Zip Code 21215	Date (MM/DD/YYYY) 11/04/2019	Amount 7.00
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount

*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)]