



# Statement of Contributions Received

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Columbus Community Bill of Rights PAC				
Full Name of Contributor Raffle (bundled)			Registration Number, if PAC	
Street Address 310 E. Hudson Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) cash
City Columbus	State OH	Zip Code 43202	Date (MM/DD/YYYY) 08/16/2018	Amount 59.00
Full Name of Contributor Fundraiser (bundled-donations < \$25 each)			Registration Number, if PAC	
Street Address 310 E. Hudson Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) cash
City Columbus	State OH	Zip Code 43202	Date (MM/DD/YYYY) 08/16/2018	Amount 347.00
Full Name of Contributor Joanne Wisler			Registration Number, if PAC	
Street Address 159 Amazon Place		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Columbus	State OH	Zip Code 43214	Date (MM/DD/YYYY) 08/23/2018	Amount 242.45
Full Name of Contributor Tish O'Dell			Registration Number, if PAC	
Street Address 7976 McCreary Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Broadview Heights	State OH	Zip Code 44147	Date (MM/DD/YYYY) 09/26/2018	Amount 100.00
Full Name of Contributor Greg Pace			Registration Number, if PAC	
Street Address 1362 Erickson Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) MightyCause
City Columbus	State OH	Zip Code 43227	Date (MM/DD/YYYY) 09/05/2018	Amount 23.98

\*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)]