



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Columbus Community Bill of Rights PAC				
Full Name of Contributor Bandana sales (bundled)			Registration Number, if PAC	
Street Address 88 W. Blake Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) cash
City Columbus	State OH	Zip Code 43202	Date (MM/DD/YYYY) 09/26/2018	Amount 60.00
Full Name of Contributor T-shirt sale			Registration Number, if PAC	
Street Address 2254 E. Main St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) cash
City Columbus	State OH	Zip Code 43209	Date (MM/DD/YYYY) 11/02/2018	Amount 20.00
Full Name of Contributor Eloise Inglezi			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) MightyCause
City	State	Zip Code	Date (MM/DD/YYYY) 11/08/2018	Amount 23.98
Full Name of Contributor Jaime Pardo			Registration Number, if PAC	
Street Address 1635Ringfield Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) cash
City Galloway	State OH	Zip Code 43119	Date (MM/DD/YYYY) 11/20/2018	Amount 15.00
Full Name of Contributor T-shirt sale			Registration Number, if PAC	
Street Address 88 W. Blake Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) cash
City Columbus	State OH	Zip Code 43202	Date (MM/DD/YYYY) 11/20/2018	Amount 25.00

*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)]