



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Citizens for Quality Schools				
Full Name of Contributor Mary Leopold			Registration Number, if PAC	
Street Address 504 Whitley Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 02/26/18	Amount 40.00
Full Name of Contributor Margaret Wright			Registration Number, if PAC	
Street Address 6965 Tanya Ter. Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 02/26/18	Amount 50.00
Full Name of Contributor Staci Collier			Registration Number, if PAC	
Street Address 2427 Fair Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43209	Date (MM/DD/YYYY) 02/26/18	Amount 62.00
Full Name of Contributor Jessica Price			Registration Number, if PAC	
Street Address 180 N. Stanwood Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 02/26/18	Amount 65.00
Full Name of Contributor Emily Behrens			Registration Number, if PAC	
Street Address 2395 Charles St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43209	Date (MM/DD/YYYY) 02/26/18	Amount 58.00

*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)]