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## **Statement of Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee						
Citizens For Robinette.						
				Registration Numb	per, if PAC	
JP Blackwood						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
2699 Kenny Rd	online					
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Grove City	OH	43123	08/0	2/19	\$25_00	
Full Name of Contributor	Registration Num			per, if PAC		
Georgia Johnson					<b>:</b>	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
6446 Oakhurst Dr	(Cas)				Cash	
City	State	Zip Code	Date (MM/DI		Amount	
Grove City	SH >	43123	08/0	19/19	\$10000	
Full Name of Contributor	Registration Nu				per, if PAC	
Erin Reeb	Reeb					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
2909 Dunhurst Dr					online	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Grave City	国る	43123	08/0	57/19	\$ 1000	
Full Name of Contributor	Registration N			Registration Numb	per, if PAC	
Kyle Hester						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
1140 Pinnade Club Dr	cash					
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
Grove City	J F	43123	09/02	119	\$ 10000	
Full Name of Contributor	Reg			Registration Numb	Registration Number, if PAC	
Rick Boehm						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
2994 Trueman Ct					Galine	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Grave City	OH 🗾		09/09/19		\$10000	

\*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)]