



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Citizens for Quality Schools				
Full Name of Contributor Jill Ovies			Registration Number, if PAC	
Street Address 6667 Albany Woods Blvd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City New Albany	State OH	Zip Code 43054	Date (MM/DD/YYYY) 02/02/2018	Amount 35.00
Full Name of Contributor Megan Bradic			Registration Number, if PAC	
Street Address 7634 Kitner Blvd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Northfield	State OH	Zip Code 44067	Date (MM/DD/YYYY) 02/02/2018	Amount 30.00
Full Name of Contributor Rachel Mooney			Registration Number, if PAC	
Street Address 275 McKinley Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City New Lexington	State OH	Zip Code 43764	Date (MM/DD/YYYY) 02/02/2018	Amount 50.00
Full Name of Contributor Jessica Anderson			Registration Number, if PAC	
Street Address 13228 Durham Cir		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Pickerington	State OH	Zip Code 43147	Date (MM/DD/YYYY) 02/02/2018	Amount 35.00
Full Name of Contributor Joan Miller			Registration Number, if PAC	
Street Address 8019 Bowfin Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Blacklick	State OH	Zip Code 43004	Date (MM/DD/YYYY) 02/02/2018	Amount 90.00

*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)]