



## **Statement of Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee			<del></del>			
Citizens for Quality Schools						
Full Name of Contributor Registration Numb					er, if PAC	
Kelly Dunick						
Street Address	Employer	/Occupation/Labor Or	Form (Cash, Check, etc.)			
1456 Elmwood Ave, Apt B					check	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Columbus	он	43212	07/25/2018		2.00	
Full Name of Contributor		<u> </u>	<u> </u>	Registration Number	er, if PAC	
Jill Elliott						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
140 Kitdare Dr	check					
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
Delaware	он	43015		07/25/2018	20.00	
Full Name of Contributor	Name of Contributor Registration Number					
Aaron Winner						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
7641 Hutton St					check	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Blacklick	ОН	43004	07/25/2018 10		10.00	
Full Name of Contributor Registration Numb					er, if PAC	
Linda Green						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
3294 Aronimink Ct	check					
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
Pickerington	ОН	43147		07/25/2018	10.00	
Full Name of Contributor Registration Number					er, if PAC	
Sarah Hensley						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
322 Rocky Springs Dr	check					
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Blacklick	он	43004	07/25/2018 4.00			

Page	Total	46.00

<sup>\*</sup>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)]