



Statement of Contributions Received

Form 31-A

ORC 3517.10

					
Full Name of Committee			,		
Craig Treneff for Council	••				
Full Name of Contributor	Registration Numb				er, if PAC
Craig Treneff					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
148 Executive Court	Treneff Cozza Law, LLC				Check
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Westerville	ОН	43081		11/27/2019	\$353.70
Full Name of Contributor				Registration Number, if PAC	
				·	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
				•	
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Full Name of Contributor	Registration Num			Registration Number	er, if PAC
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
				<u>:</u>	,
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Full Name of Contributor	Registration Numb			er, if PAC	
,					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
•					
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
				,	
Full Name of Contributor	Registration Num			er, if PAC	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
• •					
City	State	Zip Code	Date (MM/DD/YYYY)		Amount

*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)]

Page Total	\$353.70	