

Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee				
Citizens for Quality Schools				
Full Name of Contributor			Registration Number, if PAC	
Michael Cebriak				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
361 Westerdale Dr.				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Gahanna	OH	43230	02/26/18	100.00
Full Name of Contributor			Registration Number, if PAC	
Cheryl Ramey				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
85 Brooksedge Dr.				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Pataskala	OH	43062	02/26/18	100.00
Full Name of Contributor			Registration Number, if PAC	
Rodney Calloway				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
8751 Canada Ct.				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Reynoldsburg	OH	43068	02/26/18	100.00
Full Name of Contributor			Registration Number, if PAC	
Douglas Finley				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
562 Streamwater Dr.				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Blacklick	OH	43004	02/26/18	60.00
Full Name of Contributor			Registration Number, if PAC	
Craig Shimer				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
902 Rushcreek Rd.				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Galloway	OH	43119	02/26/18	50.00

*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)]