



Statement of Contributions Received

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Campaign Finance | (614) 466-3111
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Form 31-A
ORC 3517.10

Full Name of Committee CITIZENS to Keep BRISK and DURIK				
Full Name of Contributor Michael L. Durik			Registration Number, if PAC	
Street Address 12 Keswick Commons		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City New Albany	State OH	Zip Code 43054	Date 07/04/2017 MM/DD/YYYY	Amount 100
Full Name of Contributor Marlene Brisk			Registration Number, if PAC	
Street Address 8026 Loomis Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City New Albany	State OH	Zip Code 43054	Date 07/05/2017 MM/DD/YYYY	Amount 100
Full Name of Contributor Edward Chip Fellows			Registration Number, if PAC	
Street Address 7065 Maynard Pl		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City New Albany	State OH	Zip Code 43054	Date 07/20/2017 MM/DD/YYYY	Amount 100
Full Name of Contributor Colleen H Briscoe			Registration Number, if PAC	
Street Address 7582 S Goodrich St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City New Albany	State OH	Zip Code 43054	Date 07/21/2017 MM/DD/YYYY	Amount 100
Full Name of Contributor Glyde Mansh			Registration Number, if PAC	
Street Address 3449 Reynoldsburg New Albany Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City New Albany	State OH	Zip Code 43054	Date 09/08/2017 MM/DD/YYYY	Amount 111 ³⁹

*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)]