



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Houk For Council				
Full Name of Contributor Michael Uhrin			Registration Number, if PAC	
Street Address 5580 Meadow Grove Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 09/01/17	Amount 250.00
Full Name of Contributor David J. Veeley			Registration Number, if PAC	
Street Address 4538 Clayburn Dr. W.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 09/01/17	Amount 100.00
Full Name of Contributor Kristina M. Gilmore			Registration Number, if PAC	
Street Address 1261 White Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 09/02/17	Amount 100.00
Full Name of Contributor Cheryl L. Grossman			Registration Number, if PAC	
Street Address 3143 Park St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 09/03/17	Amount 100.00
Full Name of Contributor Cheryl G. Brunton			Registration Number, if PAC	
Street Address 4383 Jody Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 09/05/17	Amount 100.00

*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)]