



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens to Elect Deneese Owen				
Full Name of Contributor Jennifer Irwin			Registration Number, if PAC	
Street Address 853 Denison Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 01/19/2017	Amount \$80.00
Full Name of Contributor Tanya Ervin			Registration Number, if PAC	
Street Address 306 Crandall Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 01/20/2017	Amount \$100.00
Full Name of Contributor Kevin McCain			Registration Number, if PAC	
Street Address 1440 Cliff Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Columbus	State OH	Zip Code 43204	Date (MM/DD/YYYY) 01/20/2017	Amount \$100.00
Full Name of Contributor Michael Schadek			Registration Number, if PAC	
Street Address 1537 Guilford Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Columbus	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/03/2017	Amount \$100.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	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 **\$380.00**