



# Statement of Contributions Received

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Citizens for Beryl Piccolantonio				
Full Name of Contributor Emily Keeler			Registration Number, if PAC	
Street Address 983 Kramer Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Columbus	State OH <input checked="" type="radio"/>	Zip Code 43212	Date (MM/DD/YYYY) 8/26/2019	Amount 50.00
Full Name of Contributor Rick Duff			Registration Number, if PAC	
Street Address 312 Dunbarton Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Gahanna	State OH <input checked="" type="radio"/>	Zip Code 43230	Date (MM/DD/YYYY) 8/26/2019	Amount 25.00
Full Name of Contributor Catherine Russo			Registration Number, if PAC	
Street Address 4440 Willowbrook Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Columbus	State OH <input checked="" type="radio"/>	Zip Code 43220	Date (MM/DD/YYYY) 8/27/2019	Amount 75.00
Full Name of Contributor Dianna Bessignano			Registration Number, if PAC	
Street Address 524 Stratshire Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Gahanna	State OH <input checked="" type="radio"/>	Zip Code 43230	Date (MM/DD/YYYY) 9/2/2019	Amount 50.00
Full Name of Contributor The Matriots PAC			Registration Number, if PAC	
Street Address 2470 E. Main St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH <input checked="" type="radio"/>	Zip Code 43209	Date (MM/DD/YYYY) 9/25/2019	Amount 400.00

\*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)]