



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
Citizens for Quality Schools					
Full Name of Contributor Registration Numb					ar if PAC
Rebecca Cardaman					51, 111 70
Street Address	Employer	/Occupation/Labor Or	ranization*		Form (Cash, Check, etc.)
5461 Cameron Ellis Dr	Employer/Occupation/Labor Organization*				check
City	State	Zip Code	Amount		
Westerville	OH	43081	Date (MM/DD/YYYY) 02/02/2018		
	OII	43061			
				Registration Number	er, if PAC
Alyssa Lerose					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
3842 James River Rd			check		
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
New Albany	ОН	43054		02/02/2018	25.00
Full Name of Contributor	e of Contributor Registration Number				er, if PAC
Becky Turner					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
238 Academy Woods Dr					check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Gahanna	он	43230	02/02/2018		20.00
Full Name of Contributor				Registration Number	er, if PAC
Jon Grundtisch					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
6805 Condit Rd			check		
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Centerburg	ОН	43011		02/02/2018	18.00
Full Name of Contributor				Registration Number	er, if PAC
Hayley Sullivan					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
1810 Collingswood Rd					check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Columbus	он	43221		02/02/2018	16.00

Page	Total	104	.00	
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^{*}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)]