



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Quality Schools				
Full Name of Contributor Michele Henry			Registration Number, if PAC	
Street Address 855 Ludwig Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 02/26/18	Amount 84.98
Full Name of Contributor Paige Harding			Registration Number, if PAC	
Street Address 741 McDonell Pl.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 02/26/18	Amount 50.00
Full Name of Contributor Kelly Donaldson			Registration Number, if PAC	
Street Address 320 Warlock Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 02/26/18	Amount 150.00
Full Name of Contributor Jeffery Bower			Registration Number, if PAC	
Street Address 506 Stratshire Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 02/26/18	Amount 185.00
Full Name of Contributor Kathryn McCormick			Registration Number, if PAC	
Street Address 4777 Perry Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Centerburg	State OH	Zip Code 43011	Date (MM/DD/YYYY) 02/26/18	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)]