



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Citizens for Quality Schools				
Full Name of Contributor Justine McKenna			Registration Number, if PAC	
Street Address 755 Parkedge Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 01/04/2018	Amount 10.00
Full Name of Contributor B.S Reed			Registration Number, if PAC	
Street Address 7351 Gearied Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City Pickerington	State OH	Zip Code 43147	Date (MM/DD/YYYY) 01/04/2018	Amount 5.00
Full Name of Contributor Erin Schmidt			Registration Number, if PAC	
Street Address 699 Tim Tam		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 01/04/2018	Amount 20.00
Full Name of Contributor Sharon Suriano			Registration Number, if PAC	
Street Address 516 Stedway Court		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 01/04/2018	Amount 10.00
Full Name of Contributor Lynzee Waddle			Registration Number, if PAC	
Street Address 6377 Hoffman Trace Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City Columbus	State OH	Zip Code 43213	Date (MM/DD/YYYY) 01/04/2018	Amount 4.00

*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)]