



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Quality Schools				
Full Name of Contributor Kay Melaragno			Registration Number, if PAC	
Street Address 3098 Mann Rd	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Blacklick	State OH	Zip Code 43004	Date (MM/DD/YYYY) 06/14/2019	Amount 2.00
Full Name of Contributor Kelly Overmyer			Registration Number, if PAC	
Street Address 1456 Elmwood Avenue Apt. B	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 06/14/2019	Amount 2.00
Full Name of Contributor Erin Schmidt			Registration Number, if PAC	
Street Address 699 Tim Tam Avenue	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 06/14/2019	Amount 20.00
Full Name of Contributor Jennifer Sinkey			Registration Number, if PAC	
Street Address 1458 Stewart Place	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Blacklick	State OH	Zip Code 43004	Date (MM/DD/YYYY) 06/14/2019	Amount 4.00
Full Name of Contributor Katherine Snider			Registration Number, if PAC	
Street Address 7519 Ashley Meadow Drive	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Blacklick	State OH	Zip Code 43004	Date (MM/DD/YYYY) 06/14/2019	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)]