



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee				·	
Kromer for Council					
Full Name of Contributor Registration Number				Registration Numb	er, if PAC
Joseph Gergley					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
291 Millside Drive					Check
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Gahanna	он	43230		01/30/2017	\$195.23
Full Name of Contributor			, <u> </u>	Registration Number	er, if PAC
Andy Thompson			1		
Street Address	Employ	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
416 Strecker Lane	ł				Check
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Marietta	ОН	45750		05/16/2017	\$100.00
Full Name of Contributor	Registration Number				er, if PAC
Kerry Gleich					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
6477 Borror Road					Check
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Grove City	ОН	43123		05/28/2017	\$75.00
Full Name of Contributor	Registration Numbe				er, if PAC
Benjamin Gleich					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
6477 Borror Road					Check
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Grove City	ОН	43123		05/28/2017	\$50.00
Full Name of Contributor Registration Number					er, if PAC
Wendy Rankin					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
3914 Maple Avenue					Check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Castalia	ОН	44824		06/16/2017	\$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)]