



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Beryl Piccolantonio				
Full Name of Contributor Linda Jakob			Registration Number, if PAC	
Street Address 15709 Fernway Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Shaker Heights	State OH <input checked="" type="radio"/>	Zip Code 44120	Date (MM/DD/YYYY) 10/06/19	Amount 250.00
Full Name of Contributor Yvette McGee Brown			Registration Number, if PAC	
Street Address 643 Crossing Creek S.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Gahanna	State OH <input checked="" type="radio"/>	Zip Code 43230	Date (MM/DD/YYYY) 9/24/2019	Amount 200.00
Full Name of Contributor George McCue			Registration Number, if PAC	
Street Address 4598 Bridle Path Ln.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Dublin	State OH <input checked="" type="radio"/>	Zip Code 43017	Date (MM/DD/YYYY) 10/11/2019	Amount 500.00
Full Name of Contributor Ryan Jolley			Registration Number, if PAC	
Street Address 80 Shull Ave. 3A		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH <input checked="" type="radio"/>	Zip Code 43230	Date (MM/DD/YYYY) 8/26/2019	Amount 25.00
Full Name of Contributor From Form 31E			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY)	Amount 1910.00

*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)]