



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Committee For Grandview Heights Schools				
Full Name of Contributor Bridget Granger			Registration Number, if PAC	
Street Address 1398 Glenn Ave.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online	
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 09/28/2018	Amount 25.00
Full Name of Contributor John Ivanic			Registration Number, if PAC	
Street Address 827 Burr Ave.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online	
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 09/29/2018	Amount 25.00
Full Name of Contributor Katie Matney			Registration Number, if PAC	
Street Address 815 Gladden	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online	
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 10/01/2018	Amount 50.00
Full Name of Contributor Christy Monson			Registration Number, if PAC	
Street Address 1063 Broadview Ave	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online	
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 10/09/2018	Amount 250.00
Full Name of Contributor Logan Phillipps			Registration Number, if PAC	
Street Address 1418 W. First Ave	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online	
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 10/09/2018	Amount 120.00

*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)]