



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Supporters of Westerville Police				
Full Name of Contributor Chris & Lyndsay Monacelli			Registration Number, if PAC	
Street Address 1092 Lake Point Drive	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43082	Date (MM/DD/YYYY) 10/07/2019	Amount \$100.00
Full Name of Contributor Karl & Carol Craven			Registration Number, if PAC	
Street Address 2301 Wickliffe Rd	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/12/2019	Amount \$50.00
Full Name of Contributor Daniel Guttman			Registration Number, if PAC	
Street Address 2625 Bryden Rd	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	Date (MM/DD/YYYY) 10/15/2019	Amount \$500.00
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/DD/YYYY)	Amount

*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)]