



Statement of Contributions Received

Form 31-A

ORC	, 35	.17	10	١
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Full Name of Committee					
Citizens for Quality Schools					
Full Name of Contributor Registration Number					er, if PAC
Andrea Varasso-Mulisano			i		
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
5302 Branscom Blvd.				check	
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Westerville	он	43081	02/26/18		100.00
Full Name of Contributor Registration Number				Registration Number	er, if PAC
Kelly Long			I		•
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
P.O. Box 321	check				check
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Canal Winchester	ОН	43110		02/26/18	70.00
Full Name of Contributor	Registration Number				er, if PAC
Kristy Flynn					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
1263 Ashburnham Dr.				check	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Gahanna	ОН	43230	02/26/18		90.00
Full Name of Contributor Registration				Registration Number	er, if PAC
Janet Hughes			!		
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
930 Carroll Eastern Rd.]			check	
City	State	Zip Code	Date (MM/D	D/YYY)	Amount
Lancaster	ОН	43130		02/26/18	75.00
Full Name of Contributor Registration Number					er, if PAC
Mary Beth Friedrich					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
1256 Hall Ln.					check
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Gahanna	ОН	43230		02/26/18	50.00

*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)]

Page Total	385.00	