



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee New Albany For Kids				
Full Name of Contributor Monica Gerhart			Registration Number, if PAC	
Street Address 1826 St. Rt. 229		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Ashley	State OH	Zip Code 43003	Date (MM/DD/YYYY) 10/25/2017	Amount 25.00
Full Name of Contributor Patricia A. Parker			Registration Number, if PAC	
Street Address 5524 Buxley Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 10/25/2017	Amount 25.00
Full Name of Contributor Michael J. Carr			Registration Number, if PAC	
Street Address 7328 Upper Clarenton Dr. S		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City New Albany	State OH	Zip Code 43054	Date (MM/DD/YYYY) 10/25/2017	Amount 25.00
Full Name of Contributor Kim Gurd			Registration Number, if PAC	
Street Address 7276 Berkley Sq N		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City New Albany	State OH	Zip Code 43054	Date (MM/DD/YYYY) 11/24/2017	Amount 50.00
Full Name of Contributor Paul Naumoff			Registration Number, if PAC	
Street Address 7783 Fenway Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City New Albany	State OH	Zip Code 43054	Date (MM/DD/YYYY) 11/24/2017	Amount 500.00

*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 625.00