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## **Statement of Contributions Received**

Form 31-4

ORC 3517.10

Full Name of Committee						
Citizens For Robinette						
Full Name of Contributor					egistration Number, if PAC	
Gilbert Edwards Jr						
Street Address	Employer/Occupation/Labor Organization*			-	Form (Cash, Check, etc.)	
1450 Shafbark St.	L				Clarck	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Circleville	LI MO	43113	09/2	7/19	\$25000	
Full Name of Contributor		Registration			er, if PAC	
Mathew & Sarah Abbit	Abbi H					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
1216 McClish Ct					check	
City	State	Zip Code	Date (MM/D		Amount	
Grove City	OH I	43123	0912	5/19	\$600	
Full Name of Contributor	Regi			Registration Number	er, if PAC	
Kyle Hester				<u> </u>		
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
1140 Pinnagle Club TX					Check	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Give	3	43123	1015	5/19	\$800.00	
Full Name of Contributor	ame of Contributor				Registration Number, if PAC	
Jonathan White						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
6981 Lewis Center Bd					Check	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Salena	SHI-	43021	10/2/	19	\$800.00	
Full Name of Contributor	, ,			Registration Number	er, if PAC	
John & Lisa Dubos						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
1048 Pinnacle Club TX					Check	
City	State	Zip Code Date (MM/DD/YYYY)		Amount		
Groveaty	CHI	43123	10/09/19		52,500°	

\*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)]