



## **Statement of Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee		<u> </u>	<del></del>		
Citizens to Elect Ganoom					
Full Name of Contributor				Registration Number, if PAC	
Mary MacVicar			Ì		
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
3153 Bembridge Rd					Check
City	State	Zip Code	Date (MM/DI	DMYYY)	Amount
Columbus	он	43221	08/25/2017		250.00
Full Name of Contributor Registration Number					er, if PAC
Bradley Ruwe					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
2860 Lauren Meadows Dr					Check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Hebron	KY	41048	08/26/2017		250.00
Full Name of Contributor Registration Number					er, if PAC
Caroline Lahrmann					
Street Address	Employer/Occupation/Labor Organization*			<del></del>	Form (Cash, Check, etc.)
2359 Coventry Rd					Check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Columbus	ОН	43221	09/11/2017		250.00
Full Name of Contributor Registration Number					er, if PAC
T L Cooper					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
7424 Bayswater Pl					Check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Cincinnati	ОН	45255	:	09/11/2017	250.00
Full Name of Contributor	Registration Numb				er, if PAC
William Gabel					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
2140 N Parkway Dr					Check
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Columbus	ОН	43221	09/14/2017		250.00

\*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)]