



# Statement of Contributions Received

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Motil for City Council				
Full Name of Contributor Todd Barthelmas			Registration Number, if PAC	
Street Address 4142 Zuber Road	Employer/Occupation/Labor Organization* unemployed/laborer		Form (Cash, Check, etc.) check	
City Orient, Ohio	State OH	Zip Code 43146	Date (MM/DD/YYYY) 08/26/2019	Amount 25.00
Full Name of Contributor Dave Derubertis			Registration Number, if PAC	
Street Address 1240 Northport Drive	Employer/Occupation/Labor Organization* self/ Insurance sales		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43235	Date (MM/DD/YYYY) 08/29/2019	Amount 200.00
Full Name of Contributor Ben Brace			Registration Number, if PAC	
Street Address 4090 Haughn Road	Employer/Occupation/Labor Organization* retired		Form (Cash, Check, etc.) check	
City Grove City, Ohio	State OH	Zip Code 43123	Date (MM/DD/YYYY) 08/27/2019	Amount 100.00
Full Name of Contributor Robert Goodburn			Registration Number, if PAC	
Street Address 59 West Cooke Road	Employer/Occupation/Labor Organization* retired		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43214	Date (MM/DD/YYYY) 10/01/2019	Amount 25.00
Full Name of Contributor AJ Palus			Registration Number, if PAC	
Street Address 45 East Northwood	Employer/Occupation/Labor Organization* self/marketing		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43201	Date (MM/DD/YYYY) 09/02/2019	Amount 20.00

\*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)]