



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Bonnie Michael				
Full Name of Contributor Harold C Morley			Registration Number, if PAC	
Street Address 636 Beautyview Ct		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43214	Date (MM/DD/YYYY) 06/11/2019	Amount 150.00
Full Name of Contributor Andrew Shafran			Registration Number, if PAC	
Street Address 7128 Bluffstream Ct		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43235	Date (MM/DD/YYYY) 06/19/2019	Amount 180.00
Full Name of Contributor Jane Weislogel			Registration Number, if PAC	
Street Address 5935 N High St Apt 221		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 06/15/2019	Amount 50.00
Full Name of Contributor Gary Berntson			Registration Number, if PAC	
Street Address 114 St Julien St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 06/19/2019	Amount 25.00
Full Name of Contributor Patricia Minister			Registration Number, if PAC	
Street Address 7022 Lansdowne St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 06/20/2019	Amount 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)]