



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> COMMITTEE TO ELECT VALERIE CUMMING				
Full Name of Contributor JOHN CUMMING			Registration Number, if PAC	
Street Address 307 SOUTHBROOK DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City DAYTON	State OH	Zip Code 45459	Date (MM/DD/YYYY) 10/20/2017	Amount 50.00
Full Name of Contributor THOMAS MARSHALL-GOETZ			Registration Number, if PAC	
Street Address MMARSHALLGOETZ@YAHOO.COM		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City	State OH	Zip Code	Date (MM/DD/YYYY) 10/21/2017	Amount 25.00
Full Name of Contributor JOHN CUMMING			Registration Number, if PAC	
Street Address 307 SOUTHBROOK DR		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) ONLINE
City DAYTON	State OH	Zip Code 45459	Date (MM/DD/YYYY) 11/05/2017	Amount 25.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount

\*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)]