31-A
R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full: CITIZENS FOR WESTERVILLE

Full Name of Contributor	Registration Number, if PAC	Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	City	State	Zip Code	M	D	Y	Amount
UNITEDHEALTHCARE SERVICES, INC		P.O. BOX 1459 MN005-N100	HEALTH INSURANCE	CHECK	MINNEAPOLIS	MN	55440-1459	09	19	08	1,500.00
BRIAN GOFF		2048 QUAIL RIDGE ST		CASH	COLUMBUS	OH	43229	09	19	08	10.00
NANCY KEISTER		217 SAINT ANTOINE ST		CHECK	WORTHINGTON	OH	43085-2214	09	23	08	50.00
G. DAVID LINDIMORE		8256 SNEAD WAY		CHECK	WESTERVILLE	OH	43082-8066	09	24	08	200.00
MICHAEL E. HOOPER		2452 MECCA RD		CHECK	COLUMBUS	OH	43224	09	25	08	50.00
BAKER HOSTETLER		65 E. STATE ST, STE 101	ATTORNEYS	CHECK	COLUMBUS	OH	43215	10	09	08	1,000.00
						OH					
						OH					

1810 9/19

300 9/24

1000 10/9

* 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)]

Page Total $ 2810.00