



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Bonnie Michael				
Full Name of Contributor Kevin Showe			Registration Number, if PAC	
Street Address 634 High St Suite A	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 05/30/2019	Amount 250.00
Full Name of Contributor Cynthia L Crane			Registration Number, if PAC	
Street Address 127 W New England Ave	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 05/30/2019	Amount 25.00
Full Name of Contributor Patricia L Potts			Registration Number, if PAC	
Street Address 200 E South Street	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 05/28/2019	Amount 25.00
Full Name of Contributor Deborah J Beever			Registration Number, if PAC	
Street Address 2362 Charoe St	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Lewis Center	State OH	Zip Code 43035	Date (MM/DD/YYYY) 05/30/2019	Amount 100.00
Full Name of Contributor Kelly Whalen			Registration Number, if PAC	
Street Address 315 Longfellow Ave	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 06/03/2019	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)]