



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Committee to Elect Aileen Wagner				
Full Name of Contributor Total contributions from Form no. 31-E			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY) 10/15/2019	Amount 310.00
Full Name of Contributor Stonewall Democrats of Central Ohio			Registration Number, if PAC	
Street Address 340 East Fulton		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 10/10/2019	Amount 100.00
Full Name of Contributor Rhine McLin			Registration Number, if PAC	
Street Address 23 N Paul L Dunbar St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Dayton	State OH	Zip Code 45402	Date (MM/DD/YYYY) 10/13/2019	Amount 50.00
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)]