



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Citizens for Tricia Sprankle				
Full Name of Contributor James Hutta, DDS			Registration Number, if PAC	
Street Address 417 Silver Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Gahanna	State OH	Zip Code	Date (MM/DD/YYYY) 10/01/2019	Amount 250.00
Full Name of Contributor Patrick Glasgow			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization* Anheuser-Busch		Form (Cash, Check, etc.) PayPal
City Howard	State OH	Zip Code	Date (MM/DD/YYYY) 10/01/2019	Amount 25.00
Full Name of Contributor Leigh Lechine			Registration Number, if PAC	
Street Address 4752 Vermont Avenue		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Birmingham	State AL	Zip Code 35210	Date (MM/DD/YYYY) 10/03/2019	Amount 50.00
Full Name of Contributor Tricia Sprankle			Registration Number, if PAC	
Street Address 877 Cordero Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 10/3/2019	Amount 300.00
Full Name of Contributor Elizabeth Piersol			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City North East	State PA	Zip Code	Date (MM/DD/YYYY) 10/06/2019	Amount 100.00

*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)]