



Contributions from a Corporation or Labor Organization Supporting or Opposing a Ballot Issue

Form 30-B-1

ORC 3599.03

2019 JAN 20 AM 10:42

Name of Corporation or Labor Organization Medical Mutual of Ohio			
Street Address 2060 East Ninth St.	City Cleveland	State OH	Zip 44115
Type of Report: <input type="checkbox"/> Pre-Primary <input checked="" type="checkbox"/> Pre-General <input type="checkbox"/> Pre-Special <input type="checkbox"/> Annual <input type="checkbox"/> Post-Primary <input type="checkbox"/> Post-General <input type="checkbox"/> Post-Special <input type="checkbox"/> Semiannual		Year 2019	Election Date (MM/DD/YYYY) 11/05/2019

Contribution Information

Receiving Committee Our Community, Our Schools	Date (MM/DD/YYYY) 10/22/2019
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Street Address 119 N. Vine St.	City Westerville	State OH	Zip 43091	Amount \$2,500
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Ballot Issue Description/Ballot Issue Number School Levy for Westerville City Schools	Cash/Check/Item/Service Check
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Receiving Committee	Date (MM/DD/YYYY)
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Street Address	City	State	Zip	Amount
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Ballot Issue Description/Ballot Issue Number	Cash/Check/Item/Service
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Receiving Committee	Date (MM/DD/YYYY)
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Street Address	City	State	Zip	Amount
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Ballot Issue Description/Ballot Issue Number	Cash/Check/Item/Service
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Receiving Committee	Date (MM/DD/YYYY)
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Street Address	City	State	Zip	Amount
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Ballot Issue Description/Ballot Issue Number	Cash/Check/Item/Service
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**THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER PENALTY OF ELECTION FALSIFICATION.
WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.**


Signature of Authorized Representative

01/10/2020
Date (MM/DD/YYYY)

Gregory G Young, DPM
Print Name and Title