



Statement of Contributions Received

Form 31-A

ORC 3517.10

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Full Name of Committee <i>Committee to elect JARVIS AS Mayor</i>				
Full Name of Contributor <i>CHRISTIE M. CASADAY</i>			Registration Number, if PAC —	
Street Address <i>5823 Elmbridge Ln.</i>		Employer/Occupation/Labor Organization* <i>Office Mgr. - Business Furniture</i>		Form (Cash, Check, etc.) <i>Check</i>
City <i>Dublin</i>	State <i>OH</i>	Zip Code <i>43016</i>	Date (MM/DD/YYYY) <i>09/19/19</i>	Amount <i>50.00</i>
Full Name of Contributor <i>DONN L. KREUTZ</i>			Registration Number, if PAC —	
Street Address <i>73 COVENANT WAY - 13</i>		Employer/Occupation/Labor Organization* <i>Retired Teacher</i>		Form (Cash, Check, etc.) <i>Check</i>
City <i>CANAL Winchester</i>	State <i>OH</i>	Zip Code <i>43110</i>	Date (MM/DD/YYYY) <i>10/15/19</i>	Amount <i>20.00</i>
Full Name of Contributor <i>RODNEY STORTS</i>			Registration Number, if PAC —	
Street Address <i>48 E. WATERBO</i>		Employer/Occupation/Labor Organization* <i>Retired FIREMAN</i>		Form (Cash, Check, etc.) <i>Cash</i>
City <i>CANAL Winchester</i>	State <i>OH</i>	Zip Code <i>43110</i>	Date (MM/DD/YYYY) <i>10/15/19</i>	Amount <i>600.00</i>
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	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	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)]

Page Total *670.00*