

Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee				
Citizens for Quality Schools				
Full Name of Contributor			Registration Number, if PAC	
Richard Courter				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
1422 Reynoldsburg-New Albany Rd.				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Blacklick	OH	43004	2/28/2018	50.00
Full Name of Contributor			Registration Number, if PAC	
Patricia Twigg				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
3958 Brendham Dr. Apt. A				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Columbus	OH	43230	2/28/2018	50.00
Full Name of Contributor			Registration Number, if PAC	
Benjamin Babcanec				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
851 Moon Glow Ct.				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Gahanna	OH	43230	2/28/2018	75.00
Full Name of Contributor			Registration Number, if PAC	
Dianna Bessignano				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
524 Stratshire Ln.				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Columbus	OH	43230	02/28/2018	75.00
Full Name of Contributor			Registration Number, if PAC	
Kristen Groves				
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
7507 Ashley Meadow Dr.				check
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Blacklick	OH	43004	02/28/2018	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)]