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## **Statement of Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee						
Citizens for the Westerville Public Library						
Full Name of Contributor	Registration Numb	ber, if PAC				
Friends of the Westerville Public Library						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
126 S. State Street			Check			
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Westerville	ОН	43081		12/31/20 <b>12</b>	\$3,000.00	
Full Name of Contributor				Registration Numb	er, if PAC	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
Full Name of Contributor		Registration Num			ber, 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 Numl		Der, if PAC	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
Full Name of Contributor Registr			Registration Number	ration 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)]

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