



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Jolley				
Full Name of Contributor Sarah Pomeroy			Registration Number, if PAC	
Street Address 570 S Front St Unit 112		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 04/04/2019	Amount 50.00
Full Name of Contributor Elaine Bechant			Registration Number, if PAC	
Street Address 1009 Venetian Way		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 04/06/2019	Amount 50.00
Full Name of Contributor Mark Meuser			Registration Number, if PAC	
Street Address 804 Cherrybottom Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 04/08/2019	Amount 50.00
Full Name of Contributor Andrew Robinson			Registration Number, if PAC	
Street Address 2947 Indianola Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online
City Columbus	State OH	Zip Code 43202	Date (MM/DD/YYYY) 04/11/2019	Amount 100.00
Full Name of Contributor Robert Leis			Registration Number, if PAC	
Street Address 609 Lehman St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online
City Columbus	State OH	Zip Code 43206	Date (MM/DD/YYYY) 04/12/2019	Amount 25.00

*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)]