



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Columbus Community Bill of Rights PAC				
Full Name of Contributor Bridget Tharp			Registration Number, if PAC	
Street Address 1994 Aberdeen Dr.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 05/23/2018	Amount 25.00
Full Name of Contributor Yard sign campaign bundled - donations < \$25.00			Registration Number, if PAC	
Street Address 2231 N. High St.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) cash	
City Columbus	State OH	Zip Code 43201	Date (MM/DD/YYYY) 05/23/2018	Amount 35.00
Full Name of Contributor Re-Sisters meeting bundled donations < \$25.00			Registration Number, if PAC	
Street Address 945 King Ave.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) cash/check	
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 05/31/2018	Amount 85.00
Full Name of Contributor George T. Harding			Registration Number, if PAC	
Street Address 25134 Huron St.	Employer/Occupation/Labor Organization* retired		Form (Cash, Check, etc.) check	
City Loma Linda	State CA	Zip Code 92354	Date (MM/DD/YYYY) 06/22/2018	Amount 100.00
Full Name of Contributor Joan L. Harding			Registration Number, if PAC	
Street Address 25134 Huron St.	Employer/Occupation/Labor Organization* retired		Form (Cash, Check, etc.) check	
City Loma Linda	State CA	Zip Code 92354	Date (MM/DD/YYYY) 06/22/2018	Amount 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)]