JON HUSTED
Ohio Secretary of State

Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee
JoAnna for City Council

Full Name of Contributor				Registration Number, if PAC
Dan Miller				
Street Address	**Employer/Occupation/Labor Organization***			**Form (Cash, Check, etc.)**
4124 Mayflower Blvd				Check
City	**State**	**Zip Code**	**Date (MM/DD/YYYY)**	**Amount**
Whitehall	OH	43213	08/30/2017	100.00

Full Name of Contributor				Registration Number, if PAC
Nancy Gibson				
Street Address	**Employer/Occupation/Labor Organization***			**Form (Cash, Check, etc.)**
2712 Glenhurst Ave				Check
City	**State**	**Zip Code**	**Date (MM/DD/YYYY)**	**Amount**
St Louis Park	MO	55416	9/23/17	350.00

Full Name of Contributor				Registration Number, if PAC
Kim Maggard				
Street Address	**Employer/Occupation/Labor Organization***			**Form (Cash, Check, etc.)**
600 Link Rd				
City	**State**	**Zip Code**	**Date (MM/DD/YYYY)**	**Amount**
Whitehall	OH	43213	07/31/2017	250.00

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**
	OH			

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**
	OH			

*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 $700.00