



## **Statement of Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee		···			
Citizens for Quality Schools					!
Full Name of Contributor Registration Numb					ar if PAC
B.S. Reed					51, 11 770
Street Address	Employer	/Occupation/Labor Or	manization*		Form (Cash, Check, etc.)
7351 Gearied St	Employer/Occupation/Labor Organization*				check
	State	Zip Code	In	20000	Amount
•	OH	43147	Date (MM/DD/YYYY) 05/07/2018		
	On	43147			
Full Name of Contributor	Registration Numb				er, if PAC
Erin Schmidt					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
699 Tim Tam Ave	check				
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Gahanna	ОН	43230		05/07/2018	20.00
Full Name of Contributor	Registration Numb				er, if PAC
Jennifer Sinkey					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
1458 Stewart PI					check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Blacklick	ОН	43004	05/07/2018		4.00
Full Name of Contributor				Registration Number	er, if PAC
Katherine Snider					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
7519 Ashley Meadow Dr	check				
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Blacklick	ОН	43004	05/07/2018		4.00
Full Name of Contributor				Registration Number	er, if PAC
Cheryl Steger					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
7034 Weurful Dr					check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Canal Winchester	он	43110	05/07/2018 2.0		2.00

\*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)]

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