



## **Statement of Contributions Received**

Campaign Finance | (614) 466-3111 www.OhioSecretaryofState.gov cfinance@OhioSecretaryofState.gov Form 31-A ORC 3517.10

Full Name of Committee					
Peters Improving Westerville					
Full Name of Contributor				Registration Number, if PAC	
John Bowen					
Street Address	Employer/Occupation/Labor Organization*			<u> </u>	Form (Cash, Check, etc.)
149 Keether Dr N					Cash
City	State	Zip Code			Amount
Westerville	ОН	43081			20.00
Full Name of Contributor	Full Name of Contributor			Registration Number, if PAC	
Stonewall Democrats of Central Ohio					
Street Address	Employer	mployer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
700 Morse Rd., Suite 105				Check	
City	State	Zip Code			Amount
Columbus	ОН	43214			150.00
Full Name of Contributor		<u> </u>	<u> </u>	Registration Number	er, if PAC
John McGuire, Jr.					
Street Address	Employer/Occupation/Labor Organization*			<del></del>	Form (Cash, Check, etc.)
14 Harvard St					Check
City	State	Zip Code			Amount
Worcester	MA	01609			250.00
ull Name of Contributor				Registration Number, if PAC	
Craig Young					
Street Address	Employer/Occupation/Labor Organization*			·	Form (Cash, Check, etc.)
765 Collingwood Dr.					
City	State	Zip Code	_		Amount
Westerville	ОН	43081			50.00
Full Name of Contributor				Registration Number, if PAC	
Form 31E for 9/27/17 Fund-raiser: Contributors of S	ibutors of \$25 or less				
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
					Cash
City	State	Zip Code			Amount
	ОН				55.00

\*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)]

Pag	ge Total	525.00	
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