



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Our Community Our Schools				
Full Name of Contributor Jessica Sten			Registration Number, if PAC	
Street Address 6821 Meadow Glen Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Westerville	State OH	Zip Code 43082	Date (MM/DD/YYYY) 10/05/2019	Amount 10.00
Full Name of Contributor Tracy Davidson			Registration Number, if PAC	
Street Address 205 Walnut Ridge Ln		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Westerville	State OH	Zip Code	Date (MM/DD/YYYY) 10/05/2019	Amount 10.00
Full Name of Contributor Nancy Nestor- Baker			Registration Number, if PAC	
Street Address 25 S. Vine St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 10/05/2019	Amount 10.00
Full Name of Contributor Michael Wander			Registration Number, if PAC	
Street Address 6631 Collingwood Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Westerville	State OH	Zip Code 43082	Date (MM/DD/YYYY) 10/05/2019	Amount 10.00
Full Name of Contributor Bob Gibson			Registration Number, if PAC	
Street Address 299 Ashford Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Westerville	State OH	Zip Code 43082	Date (MM/DD/YYYY)	Amount 10.00

*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)]