

Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
Aultman for Schols					
Full Name of Contributor	Registration Numb				er. if PAC
Lesley C. Walden				3	,
Ohora A A dahara a	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
753 Southbluff Drive					Check
City	State				Amount
Westerville	DH	43082	06/0	05/2019	\$ 100.00
Full Name of Contributor	Registration Numb				er, if PAC
Rick A. Vilardo					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
33 W. Broadway St.					Cash
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Westerville	OH	43081	06/	12/2019	\$75.00
Full Name of Contributor Registration Number, if PAC					
Christopher Hultman					
Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)				
68E Broadway St.					Electronic
City	State Zip Code Date (MM/DD/YYYY)			Amount 7/.00	
Westerville	DH	43081	06 08 2019		4 1.00
Full Name of Contributor Registration Number, if PAC					
Kenneth Wright					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
1068 Weatherwood Ct					Electronic
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Mesterville	OH	43082	06/1	3/2019	\$50,00
Full Name of Contributor Registration Number					er, if PAC
Jusan Ritohie					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
Street Address Street Address City Street Address City					Electronic
.	State	Zip Code Date (MM/DD/YYYY)		Amount	
Columbus	DH	43214	06/	20/2019	1750.00

^{*}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)]