



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Conley For Council				
Full Name of Contributor Roger Howard			Registration Number, if PAC	
Street Address 136 Cherokee Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 09/20/2019	Amount 50.00
Full Name of Contributor Candy Peak			Registration Number, if PAC	
Street Address 5472 Blackhawk Forest Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Westerville	State OH	Zip Code 43082	Date (MM/DD/YYYY) 09/20/2019	Amount 15.00
Full Name of Contributor Robert Talley Jr.			Registration Number, if PAC	
Street Address 221 N. Front Street, Unit 108		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 10/11/2019	Amount 50.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount

*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)]