



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Laura Kunze for Sharon Township				
Full Name of Contributor Noah Brader			Registration Number, if PAC	
Street Address 735 Ceramic Pl #220		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 10 06 17	Amount \$75.00
Full Name of Contributor Don Herring			Registration Number, if PAC	
Street Address 2601 North Lamar Boulevard		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Austin	State OH	Zip Code 78705	Date (MM/DD/YYYY) 10 10 17	Amount \$30.00
Full Name of Contributor Jill Fergus			Registration Number, if PAC	
Street Address 162 w 2nd Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Columbus	State OH	Zip Code 43201	Date (MM/DD/YYYY) 10 10 17	Amount \$100.00
Full Name of Contributor William Ash			Registration Number, if PAC	
Street Address 840 Plum Tree Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43235	Date (MM/DD/YYYY) 10 15 17	Amount \$100.00
Full Name of Contributor Julieann Ash			Registration Number, if PAC	
Street Address 840 Plum Tree Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43235	Date (MM/DD/YYYY) 10 15 17	Amount \$100.00

*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)]

Page Total **\$405.00**