



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Quality Schools				
Full Name of Contributor Cheryl Steger			Registration Number, if PAC	
Street Address 7034 Weurful Drive	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Canel Winchester	State OH	Zip Code 43110	Date (MM/DD/YYYY) 06/14/2019	Amount 2.00
Full Name of Contributor Tracie Weaver			Registration Number, if PAC	
Street Address 1588 Wilhoit Avenue	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Lewis Center	State OH	Zip Code 43035	Date (MM/DD/YYYY) 06/14/2019	Amount 4.00
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
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)]