



Statement of Contributions Received

Campaign Finance | (614) 466-3111
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Form 31-A
ORC 3517.10

Full Name of Committee Peters Improving Westerville				
Full Name of Contributor John Schmarr			Registration Number, if PAC	
Street Address 6299 Lake Trail Dr	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43082	Amount 100.00	
Full Name of Contributor James Smith			Registration Number, if PAC	
Street Address 1028 Tall Tree Ct	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	Amount 100.00	
Full Name of Contributor Florence Lang			Registration Number, if PAC	
Street Address 621 Old Coach Rd	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	Amount 50.00	
Full Name of Contributor Mary Lightbody			Registration Number, if PAC	
Street Address 4948 East Walnut St	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	Amount 50.00	
Full Name of Contributor Linda Wood			Registration Number, if PAC	
Street Address 763 Autumn Branch Rd	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	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 400.00