



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Citizens for Quality Schools				
Full Name of Contributor Joseph Mischler			Registration Number, if PAC	
Street Address 1404 Doten Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 02/02/2018	Amount 90.00
Full Name of Contributor Krista Scheetz			Registration Number, if PAC	
Street Address 249 Caswell Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 02/02/2018	Amount 100.00
Full Name of Contributor Paige Vyas			Registration Number, if PAC	
Street Address 765 Gulf Stream Ct		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43230	Date (MM/DD/YYYY) 02/02/2018	Amount 100.00
Full Name of Contributor Beth Pardi			Registration Number, if PAC	
Street Address 4070 Lyon Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43220	Date (MM/DD/YYYY) 02/02/2018	Amount 100.00
Full Name of Contributor Amy Gray			Registration Number, if PAC	
Street Address 6179 Commonwealth Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Westerville	State OH	Zip Code 43082	Date (MM/DD/YYYY) 02/02/2018	Amount 90.00

*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)]