



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Bonnie Michael				
Full Name of Contributor Tom Dalcoma			Registration Number, if PAC	
Street Address 226 Castlecrest		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 07/01/2019	Amount 30.00
Full Name of Contributor Constance Shepherd			Registration Number, if PAC	
Street Address 600 Keyes Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 07/18/2019	Amount 100.00
Full Name of Contributor Benedita G Enrile, MD			Registration Number, if PAC	
Street Address 607 Tucker Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 07/31/2019	Amount 100.00
Full Name of Contributor Robwert S Trucksis			Registration Number, if PAC	
Street Address 358 W South Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 08/07/2019	Amount 50.00
Full Name of Contributor Suzan Demme Singh			Registration Number, if PAC	
Street Address 105 Glen Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 08/15/2019	Amount 50.00

*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)]