



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
Citizens for Tricia Sprankle Full Name of Contributor The Matriots				Registration Number, if PAC OH1761	
Street Address 2470 E. Main Street	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09/24/2019		Amount 750.00
Full Name of Contributor Matthew Baltsar				Registration Numb	er, if PAC
Street Address 4320 Dexter St	Employ	mployer/Occupation/Labor Organization*			Form (Cash, Check, etc.) PayPal
City Philadelphia	State PA	Zip Code	Date (MM/D	D/YYYY) 09/26/2019	Amount 50.00
Full Name of Contributor Valerie Sarwark	<u> </u>			Registration Numb	er, if PAC
Street Address 312 Cartier St	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) PayPal	
City Manchester	State NH	Zip Code	Date (MM/DD/YYYY) 09/28/2019		Amount 25.00
Full Name of Contributor Benjamin Leder				Registration Numb	per, if PAC
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) PayPal	
City Trinidad	State TX	Zip Code	Date (MM/D	9/29/2019	Amount 20.00
Tom Pruss Registration Num					ber, if PAC
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) PayPal	
City Sylvania	State OH	Zip Code	Date (MM/I	09/30/2019	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)]

Page Total	\$895.00	