



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Our Community Our Schools				
Full Name of Contributor Westerville Parent Council			Registration Number, if PAC	
Street Address 936 Eastwind Dr	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 9/20/2019	Amount 300.00
Full Name of Contributor Hanby Elementary PTA			Registration Number, if PAC	
Street Address 56 S. State Street	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 9/20/2019	Amount 150.00
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 Ann Dorne			Registration Number, if PAC	
Street Address 5524 Rushden Dr	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit-Paypal	
City Columbus	State OH	Zip Code 43230	Date (MM/DD/YYYY) 09/08/2019	Amount 150.00
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

*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)]