



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee KarenWilsonForCouncil.org				
Full Name of Contributor Michael Bates			Registration Number, if PAC	
Street Address 6560 Evening Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 08/29/2019	Amount 50.00
Full Name of Contributor Elizabeth Filina			Registration Number, if PAC	
Street Address 30430 Oakwood Circle		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City North Olmstead	State OH	Zip Code 44070	Date (MM/DD/YYYY) 08/30/2019	Amount 500.00
Full Name of Contributor Ellen Scherer			Registration Number, if PAC	
Street Address 112 E New England Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 09/07/2019	Amount 50.00
Full Name of Contributor Susie Kneedler			Registration Number, if PAC	
Street Address 263 Weydon Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 09/14/2019	Amount 30.00
Full Name of Contributor Elizabeth Filina			Registration Number, if PAC	
Street Address 30430 Oakwood Circle		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City North Olmstead	State OH	Zip Code 44070	Date (MM/DD/YYYY) 09/17/2019	Amount 500.00

*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)]