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Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee						
Cotizens For Robinette						
Full Name of Contributor				Registration Number, if PAC		
Proceeds from Event 04/04/2019						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
Grove City Brewing						
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
·			04/01	1/2019	\$3,850.00	
Full Name of Contributor				Registration Numb	per, if PAC	
Proceeds from Event 08/08/2019						
Street Address	Employer	/Occupation/Labor Or	ganization*		Form (Cash, Check, etc.)	
Pinnacle Golf Club			· · · · · ·			
City	State	Zip Code	Date (MM/D		Amount (C)	
			08/0	8/2019	\$3,690.00	
Full Name of Contributor Registration Number, if PAC						
Proceeds From Event 09/23/2019						
Street Address Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
1203 Pinnade Club IX						
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
		09/7	09/23	3/2019	\$3,400.00	
Full Name of Contributor				Registration Number, if PAC		
Street Address	Employer	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
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City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
Full Name of Contributor	Re			Registration Number, if PAC		
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
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*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)]