



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Quality Schools				
Full Name of Contributor K. T. Heller			Registration Number, if PAC	
Street Address 963 Timothy Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 04/05/2018	Amount 100.00
Full Name of Contributor Danielle Weatherholtz			Registration Number, if PAC	
Street Address 7883 Eagle Trace Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Westerville	State OH	Zip Code 43082	Date (MM/DD/YYYY) 04/05/2018	Amount 60.00
Full Name of Contributor Maria Gillespie			Registration Number, if PAC	
Street Address 3452 River Landings Blvd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Hilliard	State OH	Zip Code 43026	Date (MM/DD/YYYY) 04/05/2018	Amount 51.00
Full Name of Contributor Lindsay Dexter			Registration Number, if PAC	
Street Address 6355 Hares Ear Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43230	Date (MM/DD/YYYY) 04/05/2018	Amount 70.00
Full Name of Contributor Mary Leopold			Registration Number, if PAC	
Street Address 504 Whitley Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 04/05/2018	Amount 30.00

*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 311.00