



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Chris Long				
Full Name of Contributor Mark Fluharty			Registration Number, if PAC	
Street Address 761 Robbins Loop Ct.	Employer/Occupation/Labor Organization* AFL-CIO Central Ohio Labor Council		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 09/04/2019	Amount 150.00
Full Name of Contributor Teamsters Local Union No. 413, DRIVE FUND			Registration Number, if PAC	
Street Address 555 E. Rich St.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 09/05/2019	Amount 1000.00
Full Name of Contributor Darrell Gammel			Registration Number, if PAC	
Street Address 303 Siebert St.	Employer/Occupation/Labor Organization* CSI		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	Date (MM/DD/YYYY) 09/05/2019	Amount 100.00
Full Name of Contributor Ohio Association of Professional Firefighters			Registration Number, if PAC Ohio Fire PCE - Entity #9700	
Street Address 140 E. Town St.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 09/20/2019	Amount 750.00
Full Name of Contributor Cols. Building & Construction, Construction Trades Council			Registration Number, if PAC	
Street Address 939 Goodale Blvd., Ste 231	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 09/13/2019	Amount 250.00

*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)]