



# Statement of Contributions Received

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Re-Elect Norstrom				
Full Name of Contributor David M. Norstrom			Registration Number, if PAC	
Street Address 210 Hardy Way		Employer/Occupation/Labor Organization* City of Worthington		Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 09/19/2017	Amount 200.00
Full Name of Contributor David M. Norstrom			Registration Number, if PAC	
Street Address 210 Hardy Way		Employer/Occupation/Labor Organization* City of Worthington		Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 10/10/2017	Amount 12000.00
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			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			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)]