



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Gahanna Residents Improving Tomorrow				
Full Name of Contributor Rob Mattney			Registration Number, if PAC	
Street Address 155 Marrus Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 03/07/2019	Amount 100.00
Full Name of Contributor Jon Handler			Registration Number, if PAC	
Street Address 571 S High St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 03/07/2019	Amount 300.00
Full Name of Contributor Brian Larick			Registration Number, if PAC	
Street Address 774 Hunters Glen Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 03/09/2019	Amount 50.00
Full Name of Contributor Kevin Dengel			Registration Number, if PAC	
Street Address 956 Cordero Ln		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 03/10/2019	Amount 50.00
Full Name of Contributor Leah Brown			Registration Number, if PAC	
Street Address 1268 Retreat Ln		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 03/12/2019	Amount 50.00

*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)]