



## **Statement of Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Beryl Piccolantonio					
Full Name of Contributor				Registration Number, if PAC	
Dorothy Cage			!		
Street Address 2360 Sunbury Rd.	Employer/Occupation/Labor Organization				Form (Cash, Check, etc.) PayPal
2360 Sullbury Ru.					
City Columbus	State OH •	Zip Code 43219	Date (MM/DI	8/13/2019	Amount 100.00
Full Name of Contributor				Registration Numb	er, if PAC
Robert Dean					
Street Address 449 Allanby Ct.	Employer	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) PayPal
City Gahanna	State OH •	Zip Code 43230	Date (MM/D	D/YYYY) 8/21/2019	Amount 50.00
Full Name of Contributor Danielle Blue		i		Registration Numb	per, if PAC
Street Address 1625 Guilford Rd.	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) PayPal
City	State	Zip Code	Date (MM/D	D/YYYY) 8/25/19	Amount 50.00
Columbus	ОН ♥	43221		0,20,10	30.00
Full Name of Contributor Marla Becker				Registration Numb	per, if PAC
Street Address 1059 Challis Springs Dr.	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) PayPal
City New Albany	State OH •	Zip Code 43054	Date (MM/I	8/26/2019	Amount 50.00
Full Name of Contributor Ann Kneidinger-Flaherty  Registration Number					ber, if PAC
Street Address 546 Springwood Lake Dr.	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) PayPal
City Gahanna	State OH •	Zip Code 43230	Date (MM/	0D/YYYY) 8/26/2019	Amount 25.00

Page Total	275.00
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<sup>\*</sup>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)]