



Statement of Contributions Received

Form 31-A

ORC 3517.10

Euli Nama of Cammittee								
Full Name of Committee Citizens for Cotner								
Full Name of Contributor Registration Numb						er. if PAC		
Darrell Saunders								
Street Address	Emp'	loyer	r/Occupation/Labor Or	Form (Cash, Check, etc.)				
3908 Girbert St.				check				
City	State		Zip Code	DD/YYYY)	Amount			
Grove City	ОН		43123		08/26/2019	50.00		
Full Name of Contributor	<u> </u>	_			Registration Number	er, if PAC		
Molly McGrath								
Street Address	Empl	loyer	r/Occupation/Labor Or		Form (Cash, Check, etc.)			
8575 Refugee Road		check						
City	State	_	Zip Code	Date (MM/DI	D/YYYY)	Amount		
Pickerington	ОН	V	43147		11/01/2019	100.00		
Full Name of Contributor	<u> </u>			Registration Number	er, if PAC			
Steven W. Hicks for freedom								
Street Address	Empl	oyer	r/Occupation/Labor Or	Form (Cash, Check, etc.)				
1481 Lancaster Ave.				1	check			
City	State	_	Zip Code	Date (MM/DI	D/YYYY)	Amount		
Reynoldsburg	ОН		43068		12/02/2019	50		
Full Name of Contributor	L			er, if PAC				
Patricia Starling								
Street Address	Empl	oyer	/Occupation/Labor Or	ganization*		Form (Cash, Check, etc.)		
7003 Roundelay Rd. N.		check						
City	State		Zip Code	Date (MM/DI	D/YYYY)	Amount		
Reynoldsburg	он [43068	12/02/2019		50		
Full Name of Contributor		Registration Number, if PAC						
Doug Joseph Election Fund				ļ				
Street Address	Empk	oyer/	/Occupation/Labor Org	Form (Cash, Check, etc.)				
9250 Huggins Lane		check						
City	State		Zip Code Date (MM/DD/YYYY)			Amount		
Reynoldsburg	он [43068	12/9/2019 20		20.15		

*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)]

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