

## Page 3

## **Statement of Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee							
Winstead for Counci				<del> </del>			
Full Name of Contributor			1	Registration Number, if PAC			
John Stewart			1				
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
John Stewart Street Address 8551 Bryn Mawi Pa	. Cherv						
	State	Zip Code	Date (MM/DI	D/YYYY)	Amount		
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Full Name of Contributor		13650		Registration Number			
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Full Name of Contributor		<u> </u>	-	Registration Number	er, if PAC		
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Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)				Form (Cash, Check, etc.)		
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City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount		
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\*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)]

Page Total	\$1000.00	