



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
Mike Coolman for City Council					
Full Name of Contributor				Registration Number, if PAC	
Alan Case					
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
2608 Westmont Blvd.				Check	
City	State	Zip Code	Date (MM/DD/YYYY)	Amount	
Columbus	OH	43221	08-25-17	\$250.00	
Full Name of Contributor				Registration Number, if PAC	
Marilyn Rush-Ekelberry					
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
124 Beaty Ct.				Check	
City	State	Zip Code	Date (MM/DD/YYYY)	Amount	
Canal Winchester	OH	43110	08-25-17	\$50.00	
Full Name of Contributor				Registration Number, if PAC	
Robert S. Wood II					
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
7952 Spring Mill Dr				Check	
City	State	Zip Code	Date (MM/DD/YYYY)	Amount	
Canal Winchester	OH	43110	09-09-17	\$1000.00	
Full Name of Contributor				Registration Number, if PAC	
Jack R. Reynolds					
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
13659 Legends Walk Ter				Check	
City	State	Zip Code	Date (MM/DD/YYYY)	Amount	
Lakewood RCH	OH FL. XX	34202	09-22-17	\$200.00	
Full Name of Contributor				Registration Number, if PAC	
Tyler Stiles					
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
123 Chesterville Dr.				Cash	
City	State	Zip Code	Date (MM/DD/YYYY)	Amount	
Canal Winchester	OH	43110	09-15-17	\$100.00	

*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)]