



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Citizens for Quality Schools				
Full Name of Contributor Jill Elliott			Registration Number, if PAC	
Street Address 140 Kitdare Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Delaware	State OH	Zip Code 43015	Date (MM/DD/YYYY) 06/14/2019	Amount 20.00
Full Name of Contributor Linda Green			Registration Number, if PAC	
Street Address 3294 Aronimink Court		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Pickerington	State OH	Zip Code 43147	Date (MM/DD/YYYY) 06/14/2019	Amount 10.00
Full Name of Contributor Tia Holliman			Registration Number, if PAC	
Street Address 397 Rocky Springs Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Blacklick	State OH	Zip Code 43004	Date (MM/DD/YYYY) 06/14/2019	Amount 10.00
Full Name of Contributor Lisa Kelley			Registration Number, if PAC	
Street Address 834 South Cassingham Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 06/14/2019	Amount 4.00
Full Name of Contributor Scott Lofton			Registration Number, if PAC	
Street Address 1774 Harrison Pond Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City New Albany	State OH	Zip Code 43054	Date (MM/DD/YYYY) 06/14/2019	Amount 10.00

\*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)]