



Statement of Contributions Received

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Form 31-A

ORC 3517.10

Full Name of Committee DIXON FOR THE PEOPLE					
Full Name of Contributor Timothy W. Mouzon				Registration Number, if PAC	
Street Address 716 Ross Rd		Employer/Occupation/Labor Organization* BEER DRUG EAST		Form (Cash, Check, etc.) CASH	
City Whitehall	State OH	Zip Code 43213	Date (MM/DD/YYYY) 06/20/2019	Amount \$300.00	
Full Name of Contributor LESLIE LACORTE				Registration Number, if PAC	
Street Address 5066 ETNA RD		Employer/Occupation/Labor Organization* Alliance Data		Form (Cash, Check, etc.) CASH	
City Whitehall	State OH	Zip Code 43213	Date (MM/DD/YYYY) 06/25/2019	Amount \$250.00	
Full Name of Contributor Gretel Lutz				Registration Number, if PAC	
Street Address 794 Vernon Rd		Employer/Occupation/Labor Organization* J.C. Penney		Form (Cash, Check, etc.) Check	
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 07/02/2019	Amount \$30.00	
Full Name of Contributor Leslie La Corte				Registration Number, if PAC	
Street Address 5066 Etna Rd		Employer/Occupation/Labor Organization* Alliance Data		Form (Cash, Check, etc.) CASH	
City Whitehall	State OH	Zip Code 43213	Date (MM/DD/YYYY) 07/24/2019	Amount \$250.00	
Full Name of Contributor Deana Hutchison				Registration Number, if PAC	
Street Address 4635 Louise Ave.		Employer/Occupation/Labor Organization* Data Entry Clerk		Form (Cash, Check, etc.) CASH	
City Whitehall	State OH	Zip Code 43213	Date (MM/DD/YYYY) 8/2/19	Amount \$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)]

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