



# Statement of Contributions Received

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Elect Jon Parker-Jones				
Full Name of Contributor Jeanne Bauer			Registration Number, if PAC	
Street Address 64 W. Weber Rd.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal	
City Columbus	State OH	Zip Code 43202	Date (MM/DD/YYYY) 09/24/2019	Amount 120.00
Full Name of Contributor Amy Shafer			Registration Number, if PAC	
Street Address 5341 Hyde Park Dr.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal	
City Hilliard	State OH	Zip Code 43026	Date (MM/DD/YYYY) 09/24/2019	Amount 10.00
Full Name of Contributor Kathleen Jenney			Registration Number, if PAC	
Street Address 3548 Scioto Run Blvd	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	Date (MM/DD/YYYY) 09/24/2019	Amount 50.00
Full Name of Contributor Bobbi Mueller			Registration Number, if PAC	
Street Address 5248 Windsock Ct.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	Date (MM/DD/YYYY) 09/27/2019	Amount 150.00
Full Name of Contributor Kathy Parker-Jones			Registration Number, if PAC	
Street Address 3070 Landen Farm Rd. E	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash	
City Hilliard	State OH	Zip Code 43026	Date (MM/DD/YYYY)	Amount 250.00

\*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)]