



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Merisa Bowers				
Full Name of Contributor Cincinnati Industrial Creative, LLC			Registration Number, if PAC	
Street Address 14 Rossmore Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Fort Thomas	State KY	Zip Code 41075	Date (MM/DD/YYYY) 07/08/2019	Amount 50.00
Full Name of Contributor Barry Gee			Registration Number, if PAC	
Street Address 3645 Middleton Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Cincinnati	State OH	Zip Code 45226	Date (MM/DD/YYYY) 07/08/2019	Amount 200.00
Full Name of Contributor Donna Cardamone			Registration Number, if PAC	
Street Address 5420 Lantern Hill Ext.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Pittsburgh	State PA	Zip Code 15236	Date (MM/DD/YYYY) 07/09/2019	Amount 250.00
Full Name of Contributor Heather Sowald			Registration Number, if PAC	
Street Address 210 Academy Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 07/05/2019	Amount 100.00
Full Name of Contributor Marc Gofstein			Registration Number, if PAC	
Street Address 1265 Haddon Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Columbus	State OH	Zip Code 43209	Date (MM/DD/YYYY) 07/10/2019	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)]

Page Total 850.00