



Statement of Contributions Received at a Social or Fund-Raising Event

Form 31-E
R.C. 3517.10(B)

Full Name of Committee Friends of Merisa Bowers				
Full Name of Contributor Kristin Bryant			Registration Number, if PAC	
Street Address 387 Cheyenne Way		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/23/2019
City Reynoldsburg		State OH	Zip Code 43066	Amount 150.00
Form (Cash, Check, Etc) check				
Full Name of Contributor Jessica D'Varga			Registration Number, if PAC	
Street Address 4100 Pegg Ave.		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/23/2019
City Columbus		State OH	Zip Code 43214	Amount 50.00
Form (Cash, Check, Etc) check				
Full Name of Contributor Mellissia Fuhrmann			Registration Number, if PAC	
Street Address 1849 Willoway Circle N.		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/23/2019
City Columbus		State OH	Zip Code 43220	Amount 50.00
Form (Cash, Check, Etc) check				
Full Name of Contributor Bryan Griffith			Registration Number, if PAC	
Street Address 6465 Martin Place		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/23/2-10
City Dublin		State OH	Zip Code 43017	Amount 200.00
Form (Cash, Check, Etc) check				
Full Name of Contributor Larry Hayman			Registration Number, if PAC	
Street Address 1112 Perry Street Unit E		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/23/2019
City Columbus		State OH	Zip Code 43201	Amount 50.00
Form (Cash, Check, Etc) PayPal				

* 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)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total Contributions This Event

Total Expenditures This Event

Page Total \$ 500.00