



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
Friends of Merisa Bowers					
Full Name of Contributor	Registration Number, if PAC				
Amy Harkins			,		
Street Address	Employer	r/Occupation/Labor Or	Form (Cash, Check, etc.)		
56 E. Kanawha Ave.			PayPal		
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Columbus	ОН	43214		06/11/2019	50.00
Full Name of Contributor	er, if PAC				
Athena Inembolides			1		
Street Address	Employer	r/Occupation/Labor Or	Form (Cash, Check, etc.)		
625 City Park Ave.			PayPal		
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Columbus	ОН	43206		06/11/2019	100.00
Full Name of Contributor	er, if PAC				
David Singleton					
Street Address	Employer		Form (Cash, Check, etc.)		
6029 Robison Road			PayPal		
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Cincinnati	ОН	45213	06/11/2019		250.00
Full Name of Contributor	er, if PAC				
Law Offices of J.S. Pontone					
Street Address Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
532 Union Street			PayPai		
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Brooklyn	NY	11215		06/11/2019	100.00
Full Name of Contributor	er, if PAC				
Olivia Smith					
Street Address	Employer/	/Occupation/Labor Org	Form (Cash, Check, etc.)		
123 Boggs Lane			PayPal		
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Cincinnati	ОН	45246		06/12/2019	50.00

Page	Total	550.00	
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^{*}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)]