

FOR PAPER FILING ONLY

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends of Amy Harkins							
Full Name of Contributor Contributions from Form No. 31-E 9/13/17					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
			0	9	1	3	70.00
Full Name of Contributor Contributions from Form No. 31-E 10/13/17					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
			1	0	1	3	257.10
Full Name of Contributor Gloria Harkins					Registration Number, if PAC		
Street Address 1740 Ripplingbrook Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Mansfield	State O H	Zip Code 44904	M 1	D 0	Y 0	5	Amount 50.00
Full Name of Contributor Joe Hardin					Registration Number, if PAC		
Street Address 1978 Turners Landing		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash		
City Russellville	State T N	Zip Code 37860	M 1	D 0	Y 0	5	Amount 500.00
Full Name of Contributor Aggregate of Contributions \$25 or Less					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ActBlue donation		
City	State	Zip Code	M	D	Y	Amount 478.00	
Full Name of Contributor Theresa Collins					Registration Number, if PAC		
Street Address 3397 PENFIELD ROAD		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ActBlue donation		
City Columbus	State O H	Zip Code 43227	M 1	D 0	Y 1	4	Amount 27.00
Full Name of Contributor Lori Ziegler Halt					Registration Number, if PAC		
Street Address 87 Old Farm Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ActBlue Donation		
City Mansfield	State M A	Zip Code 2048	M 0	D 9	Y 1	5	Amount 30.00
Full Name of Contributor Angela Gerou					Registration Number, if PAC		
Street Address 4929 Fleetwood		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Act Blue Donation		
City Knoxville	State T N	Zip Code 37921	M 0	D 9	Y 1	6	Amount 40.00

* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 1,452.10