



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Anthony Caldwell				
Full Name of Contributor Thomas Egan			Registration Number, if PAC	
Street Address 123 W. 2nd Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online
City Columbus	State OH	Zip Code 43201	Date (MM/DD/YYYY) 9-21-17	Amount 25.00
Full Name of Contributor Janetta King			Registration Number, if PAC	
Street Address 168 Boyd Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 9-21-17	Amount 50.00
Full Name of Contributor Jen House			Registration Number, if PAC	
Street Address 245 E. 2nd Ave. #219		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online
City Columbus	State OH	Zip Code 43201	Date (MM/DD/YYYY) 9-21-17	Amount 25.00
Full Name of Contributor Ashley E. Dwire			Registration Number, if PAC	
Street Address 1401 Blair Mill Road #1705		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online
City Silver Spring	State MD	Zip Code 20910	Date (MM/DD/YYYY) 9-21-17	Amount 50.00
Full Name of Contributor Nathaniel Dowds			Registration Number, if PAC	
Street Address 618 Vista Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 9-21-17	Amount 50.00

*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)]