



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Anthony Caldwell				
Full Name of Contributor Kathy McCormick			Registration Number, if PAC	
Street Address 3660 St. Hwy 474		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online
City Olive Hill	State OKY	Zip Code 41164	Date (MM/DD/YYYY) 9-6-17	Amount 100.00
Full Name of Contributor Sherr: McKinney			Registration Number, if PAC	
Street Address 1606 Parkway Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online
City Huntington	State WV	Zip Code 25705	Date (MM/DD/YYYY) 9-6-17	Amount 100.00
Full Name of Contributor Tim Barry			Registration Number, if PAC	
Street Address 1606 Buford Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Richmond	State VA	Zip Code 23235	Date (MM/DD/YYYY) 9-6-17	Amount 25.00
Full Name of Contributor Bob Hagan			Registration Number, if PAC	
Street Address 562 Madera Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Youngstown	State OH	Zip Code 44504	Date (MM/DD/YYYY) 9-6-17	Amount 100.00
Full Name of Contributor William J. Robinson			Registration Number, if PAC	
Street Address 1730 Rhode Island Ave NW		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Washington	State DC	Zip Code 20036	Date (MM/DD/YYYY) 9-6-17	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)]