



Statement of Contributions Received

Form 31-A

					ORC 3517.10
Full Name of Committee					
Friends of Schregardus					
Full Name of Contributor	Registration Number, if PAC				
Total Contributions From Form 31-E					
Street Address	Employer/Occupation/Labor Organization*			L	Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
	ОН			06/14/2017	1230.00
Full Name of Contributor	ame of Contributor Registration		Registration Number	Number, if PAC	
Jason Macke					
Street Address	Employ	Employer/Occupation/Labor Organization* Form			Form (Cash, Check, etc.)
1623 Clifton Ave Columbus Ohio				PayPal	
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Columbus	ОН	43203		06/14/2017	25.00
Full Name of Contributor		<u> </u>		Registration Number, if PAC	
Terra Goodnight					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
5560 Millington Road				PayPal	
City	State	Zip Code	Date (MM/D	D/YYY)	Amount
Columbus	ОН	43235		06/12/2017	50.00
Full Name of Contributor	tributor Registration Number		er, if PAC		
Lisa Cohn					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
34 Bayview St.				check	
City	State	Zip Code	Date (MM/D	DYYYY)	Amount
Belfast	ME	04915		06/30/2017	20.00
Full Name of Contributor			<u>,,</u>	Registration Number	er, if PAC
Nancy Seymour					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
540 Humboldt Court		check			
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Gahanna	ОН	43230		07/02/2017	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 also appear. [R.C. 3517.10(B)(4)]

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	Page Total	1,365.00	
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