



Statement of Contributions Received

Form 31-A

ORC 3517.10

| Campaign Finance (614) 466-3111 | |
|-----------------------------------|--|
| | |
| www.OhioSecretaryofState.gov | |
| cfinance@OhioSecretaryofState.gov | |

| Full Name of Committee | | | | | | | |
|--|--|----------|-------------|--------------------------|--------------------------|--|--|
| Friends of Ian Mykiel | | | | | | | |
| Full Name of Contributor Registration Num | | | | | per, if PAC | | |
| Ian Mykiel | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | | Form (Cash, Check, etc.) | | |
| 325 Medich way | I Ionmykel | | | Cash | | | |
| City | State | Zip Code | Date (MM/DI | D/YYYY) | Amount | | |
| worthmaton | ОН | 43085 | 05-2 | 2-2017 | 250.00 | | |
| Full Name of Contributor | | | | Registration Numb | per, if PAC | | |
| Ian Mykel | | | | <u> </u> | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | <u> </u> | Form (Cash, Check, etc.) | | |
| 325 medick way | | | | | cash | | |
| City | State | Zip Code | Date (MM/DI | | Amount | | |
| worthington | ОН | 43085 | 09-09 | -2017 | 200.00 | | |
| Full Name of Contributor | Registration Numb | | | | per, if PAC | | |
| Ian Mykel | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) | | | |
| 325 Medick way | <u></u> | | | | CESH | | |
| City | State Zip Code Date (MM/DD/YYYY) | | | • | Amount Of | | |
| worthington | ОН | 43085 | 09-0 | 5-2017 | 500,00 | | |
| Full Name of Contributor Registration Number, if PAC | | | | | per, if PAC | | |
| In Mykel Street Address | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) | | | |
| 325 Meddek Wag | | | | | | | |
| City | State | Zip Code | Date (MM/DI | · | Amount | | |
| worthington | ОН | 43085 | 09.25 | -2017 | 300,00 | | |
| Full Name of Contributor | | | | Registration Numl | ber, if PAC | | |
| I an Mikel | | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* Form | | | Form (Cash, Check, etc.) | | | |
| 325 medick way City Worthington | | | | | | | |
| City | State | Zip Code | Date (MM/D | | Amount | | |
| worth ungton | ОН | 43085 | 09.2 | 3.2017 | 250.00 | | |
| | | | | | | | |

| Page Total | 500.00 |
|------------|-------------|
| | |

^{*}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)]