OFFICE OF THE
Ohio Secretary of State

Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee		
Friends of Tina Pierce		

Full Name of Contributor		Registration Number, if PAC
Terri D. Taylor		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
2845 Bretton Woods Drive		Cash

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Columbus	OH	43231	10/17/2019	$22.00

Full Name of Contributor		Registration Number, if PAC
Melvin Lyles		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
5549 Nutmeg Place	COTA/Operator	Cash

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Groveport	OH	43125	10/17/2019	$10.00

Full Name of Contributor		Registration Number, if PAC
Kesha & Jerry Pierce		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
800 Parsons Avenue	Studio M/Copyking	Cash

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Columbus	OH	43206	10/17/2019	$10.00

Full Name of Contributor		Registration Number, if PAC
Max Betin Sr.		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
2530 Sliver Oak Drive	COTA/Operator	Cash

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Columbus	OH	43232	10/17/2019	$10.00

Full Name of Contributor		Registration Number, if PAC
LaVerne Melton		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
		Cash

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
			10/17/2019	$10.00

*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)]

Page Total	$62.00