



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee <i>Friends of Troy Markham</i>				
Full Name of Contributor <i>Emily Markham</i>			Registration Number, if PAC	
Street Address <i>875 S. Remington</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check <i>Check</i>
City <i>Bexley</i>	State <i>OH</i>	Zip Code <i>43209</i>	Date (MM/DD/YYYY) <i>9/30/2019</i>	Amount <i>\$25.00</i>
Full Name of Contributor <i>Nora Hagar</i>			Registration Number, if PAC	
Street Address <i>5003 Birch Grove</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>Facebook</i>
City <i>Groveport</i>	State <i>OH</i>	Zip Code <i>43125</i>	Date (MM/DD/YYYY) <i>9/30/2019</i>	Amount <i>\$100.00</i>
Full Name of Contributor <i>Stacey Games</i>			Registration Number, if PAC	
Street Address <i>2629 Bexley Park</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <i>Venmo</i>
City <i>Bexley</i>	State <i>OH</i>	Zip Code <i>43209</i>	Date (MM/DD/YYYY) <i>7/5/2019</i>	Amount <i>\$100.00</i>
Full Name of Contributor <i>Patricia Markham</i>			Registration Number, if PAC	
Street Address <i>875 S. Remington</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City <i>Bexley</i>	State <i>OH</i>	Zip Code <i>43209</i>	Date (MM/DD/YYYY) <i>10/15/2019</i>	Amount <i>425.00</i>
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY)	Amount

*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)]

\$650.00

Page Total ~~*\$2225.00*~~