

## **Statement of Contributions Receive**

ORC 3517.10

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Full Name of Committee Friends of Trong Makhen					
	<i>ن</i> ج			Registration Numb	
Full Name of Contributor  April  Wa	15h			Registration Numb	ei, ii FAC
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
1005 S. Remoston Rd					Venmo
City	State	Zip Code 43209	Date (MM/DD	20/9	Amount 20,00
Full Name of Contributor  Any Goldstein  Registration Number, if PAC					
Street Address		Occupation/Labor Or	ganization*		Form (Cash, Check, etc.)
878 Venon 'Kd					Venno
City Bexlex	State	zip Code 43205	Date (MM/DE	2/2019	# 50 60
Full Name of Contributor Kendall	Ki	NG		Registration Numb	oer, if PAC
Street Address 100 Kin Ane	Employer	/Occupation/Labor O	rganization*		Form (Cash, Check, etc.)
Columbis	State	Zip Code	Date (MM/DI	0114 19	Amount #2000
Full Name of Contributor  Dane  Ad	ler			Registration Num	ber, if PAC
Street Address 375 5. Parkview Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
City Bexley	State	2ip Code 43205	Date (MM/DI	12019	Amount # 10000
Full Name of Contributor  Brad Dresbach  Registration Num					
Street Address 293 N. Ardmore Rd	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
City Bexley	State	Zip Code 43209	Date (MM/D	2019	#75.50

\*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)]