



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Jadwin for Gahanna				
Full Name of Contributor Tom Zelina			Registration Number, if PAC	
Street Address 567 Woodbay		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online/website
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 08/20/2019	Amount 100.00
Full Name of Contributor Douglas Jadwin			Registration Number, if PAC	
Street Address 4635 Windrow Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online/website
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 08/23/2019	Amount 250.00
Full Name of Contributor Dave Magnacca			Registration Number, if PAC	
Street Address 1297 Bayboro Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online/website
City New Albany	State OH	Zip Code 43054	Date (MM/DD/YYYY) 09/15/2019	Amount 100.00
Full Name of Contributor Jan Bloom			Registration Number, if PAC	
Street Address 3810 Savage Hill Rd., SE		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online/website
City Lancaster	State OH	Zip Code 43130	Date (MM/DD/YYYY) 09/12/2019	Amount 50.00
Full Name of Contributor Pamela Brown			Registration Number, if PAC	
Street Address 1820 N. Columbus St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Lancaster	State OH	Zip Code 43130	Date (MM/DD/YYYY) 09/12/2019	Amount 50.00

*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)]