



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Meredith Lawson-Rowe				
Full Name of Contributor Kristin Bryant			Registration Number, if PAC	
Street Address 387 Cheyenne Way	Employer/Occupation/Labor Organization* attorney - Bryant Law Offices, LLC		Form (Cash, Check, etc.) check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 01/19/2019	Amount \$100.00
Full Name of Contributor Raul Camacho			Registration Number, if PAC	
Street Address 5335 Bayside Rdige Dr.	Employer/Occupation/Labor Organization* unknown		Form (Cash, Check, etc.) check	
City Galena	State OH	Zip Code 43021	Date (MM/DD/YYYY) 02/06/2019	Amount \$200.00
Full Name of Contributor Lisa Birch			Registration Number, if PAC	
Street Address 1514 Belfaire Lake Trail	Employer/Occupation/Labor Organization* unknown		Form (Cash, Check, etc.) credit card	
City Dacula	State GA	Zip Code 30019	Date (MM/DD/YYYY) 02/23/2019	Amount \$25.00
Full Name of Contributor Pamela Walker			Registration Number, if PAC	
Street Address 1459 Bellsmith Dr.	Employer/Occupation/Labor Organization* unknown		Form (Cash, Check, etc.) credit card	
City Roswell	State GA	Zip Code 30076	Date (MM/DD/YYYY) 02/26/2019	Amount \$100.00
Full Name of Contributor Ruth Lawson			Registration Number, if PAC	
Street Address 2551 S. Limestone St.	Employer/Occupation/Labor Organization* retired		Form (Cash, Check, etc.) check	
City Springfield	State OH	Zip Code 45505	Date (MM/DD/YYYY) 03/09/2019	Amount \$100.00

*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 \$525.00