



Statement of Contributions Received

Form 31-A

ORC 3517.10

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Full Name of Committee <i>Neighbors for Bryan</i>				
Full Name of Contributor <i>Joseph Durham</i>			Registration Number, if PAC	
Street Address <i>612 E. Dominion Blvd</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43214</i> 43068	Date (MM/DD/YYYY) <i>10/23/19</i>	Amount <i>100</i>
Full Name of Contributor <i>Mark Altier</i>			Registration Number, if PAC	
Street Address <i>1928 Samuels Ave</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City <i>Worthington</i>	State <i>OH</i>	Zip Code <i>43085</i>	Date (MM/DD/YYYY) <i>10/23/19</i>	Amount <i>75</i>
Full Name of Contributor <i>Matthew Ross</i>			Registration Number, if PAC	
Street Address <i>7923 Oak Valley</i>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City <i>Reynoldsburg</i>	State <i>OH</i>	Zip Code <i>43068</i>	Date (MM/DD/YYYY) <i>10/23/19</i>	Amount <i>100</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
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)]