

Campaign Finance | (614) 466-3111

City

Statement of Contributions Received

Form 31-A

ORC 3517.10

cfinance@OhioSecretaryofState.gov					ORC 3317.10	
Full Name of Committee	1					
FUENDS of LONG J.	Elms	re				
Full Name of Contributor					Registration Number, if PAC	
DAVID White						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
748 S. Roosevelt Ave	1		PAYPAL			
City	State	zip Code Date (MM/DD/YYYY)			Amount	
Beyley	ОН	43209	10/17	117	100.00	
Full Name of Contributor					Number, if PAC	
EVOLUTION Supporting	5 Se	MUICES				
EVOLUTION Supportive	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
113 BMAR ROSE LANE	SE	2 F	PAYPAL			
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
GAMER, NC	DHM	27529	10/1.	7/17	30.00	
Full Name of Contributor	Regi				gistration Number, if PAC	
GIENE UlvERSIN-CAIN					·	
Street Address	Employe	er/Occupation/Labor C	rganization*		Form (Cash, Check, etc.)	
2784 BARBARA LN NE	UNDERIORISER				PAY PAL	
City	State	State Zip Code Date (MM/DD/YYYY)			Amount/	
Manista, GA	OHM	300	10/10	117	75,00	
Full Name of Contributor	-'				on Number, if PAC	
Marvin Grayn III						
Street Address	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
4055 SUNBURY Rd	551	e ·		PAPPAL		
City	State			Amount		
Columbus	ОН	43219	10/14	117	10.00	
Full Name of Contributor				Registration Number, if PAC		
Michiel = ulllimaham						
Street Address	Employe	er/Occupation/Labor C	organization*		Form (Cash, Check, etc.)	
MICHELE WILLIAMS HAM Street Address 6456 WESLEY WAY	SALOS					

*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)]

43092

Zip Code

State OH Date (MM/DD/YYYY)

Page 1	Total	3	15.	00	
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Amount