



# Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee FRIENDS OF TROY MARKHAM					
Full Name of Contributor John Offenberger				Registration Number, if PAC	
Street Address 33 N. Remington Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 08/18/19	Amount 25.00	
Full Name of Contributor Michelle Mireo				Registration Number, if PAC	
Street Address 783 S. Cassingham Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Venmo	
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 08/23/19	Amount 35.00	
Full Name of Contributor Ronald Robin's Jr.				Registration Number, if PAC	
Street Address 2330 Canterbury Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	Date (MM/DD/YYYY) 08/24/19	Amount 200.00	
Full Name of Contributor Sarah Blumenfeld				Registration Number, if PAC	
Street Address 2508 Bexley Park Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Venmo	
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 8/30/2019	Amount \$10.00	
Full Name of Contributor Gretchen Webster				Registration Number, if PAC	
Street Address 1017 Euclid Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Venmo	
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 9/3/2019	Amount \$25.00	

\*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 \$295.00