



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends For Sorenson				
Full Name of Contributor Meredith Lawson Rowe			Registration Number, if PAC	
Street Address 2100 Belltree		Employer/Occupation/Labor Organization* Quality Supply Chain CO-OP		Form (Cash, Check, etc.) Cash
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/12/2019	Amount 25
Full Name of Contributor Reynoldsburg Area Democrats			Registration Number, if PAC	
Street Address PO Box 1523		Employer/Occupation/Labor Organization* Local Political Party PAC		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/20/2019	Amount 50
Full Name of Contributor Margret Mary-Luzny			Registration Number, if PAC	
Street Address 1449 Sanzon Drive		Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) Check
City Fairborn	State OH	Zip Code 45324	Date (MM/DD/YYYY) 08/29/2019	Amount 20
Full Name of Contributor Nicodemus for Trustee			Registration Number, if PAC	
Street Address 1146 Carrousel Drive East		Employer/Occupation/Labor Organization* Campaign Committee		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/16/2019	Amount 200
Full Name of Contributor Kenneth Madsen			Registration Number, if PAC	
Street Address 1387 Pleasant Valley Drive		Employer/Occupation/Labor Organization* The Ohio State University		Form (Cash, Check, etc.) Check
City Newark	State OH	Zip Code 43055	Date (MM/DD/YYYY) 08/30/2019	Amount 50

*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)]