



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Anthony Caldwell				
Full Name of Contributor Aaron Pickrell			Registration Number, if PAC	
Street Address 34 N. Remington Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Online
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 8-25-17	Amount 500.00
Full Name of Contributor Jon Yangdahl			Registration Number, if PAC	
Street Address 456 36th Street Apt. B		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Sacramento	State CA	Zip Code 95816	Date (MM/DD/YYYY) 8-30-17	Amount 100.00
Full Name of Contributor Trevor Elkins			Registration Number, if PAC	
Street Address 3888 E. 43rd Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Newburgh Height	State OH	Zip Code 44105	Date (MM/DD/YYYY) 9-3-17	Amount 100.00
Full Name of Contributor Al Bacon			Registration Number, if PAC	
Street Address #1 Lakeview Terrace		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City Barboursville	State WV	Zip Code 25504	Date (MM/DD/YYYY) 9-6-17	Amount 100.00
Full Name of Contributor Samara Knight			Registration Number, if PAC	
Street Address 4633 S. Cyn Cir		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) online
City South Euclid	State OH	Zip Code 44121	Date (MM/DD/YYYY) 9-6-17	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)]