

Statement of Contributions Received

Page ____

ORC 3517.10

Full Name of Committee					
Friends for Michael Farley Committee					
Full Name of Contributor Registration Numb					er, if PAC
FOP Political Education Fund PCE					
Street Address	Employe	oyer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
6800 Schrock Hill Ct.					Check
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Columbus	ОН	43229		09/19/2019	750.00
Full Name of Contributor				Registration Number	er, if PAC
NiSource PAC	C00051979			C00051979	
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
290 West Nationwide Blvd	Check				
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Columbus	ОН	43215		10/08/2019	150.00
Full Name of Contributor		,.l		Registration Number	er, if PAC
Total contributions from Form no. 31-E					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
	он		·	09/12/2019	2610.00
Full Name of Contributor	<u> </u>			Registration Number	er, if PAC
Total contributions from Form no. 31-E					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
	ОН			09/19/2019	2450.00
Full Name of Contributor Registration Numb				er, if PAC	
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State OH	Zip Code	Date (MM/DI	D/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)]

Page	Total	5960.00
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