



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Mack Quesenberry				
Full Name of Contributor Reyn. Chamber of Comm			Registration Number, if PAC	
Street Address 1580 Brice Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Reyn	State OH	Zip Code 43068	Date (MM/DD/YYYY) 09-03-2019	Amount 20.00
Full Name of Contributor UNITED FOOD and COMMERCIAL UNION			Registration Number, if PAC	
Street Address 1775 K Street, NW		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Washington	State DC	Zip Code 20006	Date (MM/DD/YYYY) 10-04-2019	Amount 5500.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/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)]