



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Re-Elect Jamison for Judge				
Full Name of Contributor Frances Anderson			Registration Number, if PAC	
Street Address 4495 Ramsdell Road		Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43231	Date (MM/DD/YYYY) 01/05/2018	Amount \$500.00
Full Name of Contributor Gloria Piscura			Registration Number, if PAC	
Street Address 3488 Austinburg Rd		Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) Check
City Ashtabula	State OH	Zip Code 44004	Date (MM/DD/YYYY) 01/16/2018	Amount \$75.00
Full Name of Contributor Donna Parmigian			Registration Number, if PAC	
Street Address 4650 N. Ridge Road West		Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) Check
City Ashtabula	State OH	Zip Code 44004	Date (MM/DD/YYYY) 01/19/2018	Amount \$125.00
Full Name of Contributor Gregg Lewis			Registration Number, if PAC	
Street Address 625 City Park Avenue		Employer/Occupation/Labor Organization* Self/Attorney		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 02/06/2018	Amount \$150.00
Full Name of Contributor Guy Parmigian			Registration Number, if PAC	
Street Address P O Box 145		Employer/Occupation/Labor Organization* Benton Carroll Schools/Superintendent		Form (Cash, Check, etc.) Check
City Oak Harbor	State OH	Zip Code 43449	Date (MM/DD/YYYY) 02/05/2018	Amount \$50.00

*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)]