



Statement of Contributions Received

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Form 31-A

ORC 3517.10

Full Name of Committee Friends of Jessica Saad				
Full Name of Contributor Liz Magee			Registration Number, if PAC	
Street Address 2648 Bryden Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic transfer
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09 10 19	Amount 20.00
Full Name of Contributor Shannon Duffley			Registration Number, if PAC	
Street Address 2584 Fair Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic transfer
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09 10 19	Amount 10.00
Full Name of Contributor Angela Nugler			Registration Number, if PAC	
Street Address 2562 Bexley Park		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic transfer
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09 10 19	Amount 20.00
Full Name of Contributor Elizabeth Carlisle			Registration Number, if PAC	
Street Address 264 N Drexel		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic transfer
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09 09 19	Amount 50.00
Full Name of Contributor Andrew Zupnick			Registration Number, if PAC	
Street Address 158 S Roosevelt		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic transfer
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09 09 19	Amount 20.00

*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)]