



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Sarah Ackman				
Full Name of Contributor Janna Parker			Registration Number, if PAC	
Street Address 10010 Cobble Brook Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Centerville	State OH	Zip Code 45458	Date (MM/DD/YYYY) 09/03/2019	Amount \$50.00
Full Name of Contributor Andrea Mulholland			Registration Number, if PAC	
Street Address 601 S. Third St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Columbus	State OH	Zip Code 43206	Date (MM/DD/YYYY) 09/04/2019	Amount \$50.00
Full Name of Contributor Andy Wilson			Registration Number, if PAC	
Street Address 2523 Wildflower Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Springfield	State OH	Zip Code 45504	Date (MM/DD/YYYY) 08/31/2019	Amount \$200.00
Full Name of Contributor Jaquiline Lampert			Registration Number, if PAC	
Street Address 2531 Fair Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 08/06/2019	Amount \$300.00
Full Name of Contributor Breann Gonzales Almos			Registration Number, if PAC	
Street Address 751 S. Remington		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09/09/2019	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)]

Page Total **\$700.00**