



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Melissa Anderson				
Full Name of Contributor Vickie Zurek			Registration Number, if PAC	
Street Address 5143 Maplewood Ct E		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic
City Columbus	State OH	Zip Code 43229	Date (MM/DD/YYYY) 10/18/2019	Amount \$30.00
Full Name of Contributor Merisa Bowers			Registration Number, if PAC	
Street Address 363 Higley Court		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 10/18/2019	Amount \$25.00
Full Name of Contributor Marilyn Verber			Registration Number, if PAC	
Street Address 4334 Scenic Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic
City Columbus	State OH	Zip Code 43214	Date (MM/DD/YYYY) 10/18/2019	Amount \$10.00
Full Name of Contributor Edith Rigby			Registration Number, if PAC	
Street Address 1401 Pinyon Pine Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic
City Sarasota	State FL	Zip Code 34240	Date (MM/DD/YYYY) 10/20/2019	Amount \$10.00
Full Name of Contributor Stella Shaw			Registration Number, if PAC	
Street Address 390 Beaver Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic
City Whitehall	State OH	Zip Code 43213	Date (MM/DD/YYYY) 10/22/2019	Amount \$25.00

*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)]

\$100.00