



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Friends of Merisa Bowers				
Full Name of Contributor Janet Schwarz			Registration Number, if PAC	
Street Address 500 Beaverbrook Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 08/20/2019	Amount 25.00
Full Name of Contributor AJ Casey			Registration Number, if PAC	
Street Address 1742 East Broad Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Columbus	State OH	Zip Code 43203	Date (MM/DD/YYYY) 08/20/2019	Amount 100.00
Full Name of Contributor Robert Dean			Registration Number, if PAC	
Street Address 449 Allanby Court		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 08/21/2019	Amount 50.00
Full Name of Contributor Ann Flaherty			Registration Number, if PAC	
Street Address 546 Springwood Lake		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 08/21/2019	Amount 30.00
Full Name of Contributor Charles Liszkay			Registration Number, if PAC	
Street Address 457 Tresham Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 08/21/2019	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)]