

FOR PAPER FILING ONLY

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee to Elect Erin Upchurch							
Full Name of Contributor NASW - Ohio PACE National Association of Social Workers					Registration Number, if PAC OH254		
Street Address 33 Norht Third Street, Suite 530		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0	D 7	Y 0	Amount 500.00	
Full Name of Contributor Gina LaRoche					Registration Number, if PAC		
Street Address 712 College Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ActBlue		
City Richmond	State I N	Zip Code 47374	M 0	D 7	Y 0	Amount 50.00	
Full Name of Contributor Suzanne Roberts					Registration Number, if PAC		
Street Address 200 Wilson Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ActBlue		
City Columbus	State O H	Zip Code 43205	M 0	D 8	Y 0	Amount 100.00	
Full Name of Contributor Mary Lou Langenhop					Registration Number, if PAC		
Street Address 16790 Connector Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ActBlue donation		
City Fredricktown	State O H	Zip Code 43019	M 0	D 8	Y 0	Amount 250.00	
Full Name of Contributor Rodney Wollam					Registration Number, if PAC		
Street Address 1479 Devonhurst Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ActBlue donation		
City Columbus	State O H	Zip Code 43232	M 0	D 8	Y 1	Amount 20.00	
Full Name of Contributor Brandon Allen					Registration Number, if PAC		
Street Address 370 Morrison Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ActBlue donation		
City Columbus	State O H	Zip Code 43205	M 0	D 8	Y 2	Amount 100.00	
Full Name of Contributor Contributions from form No. 31-E 08/18/17					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M 0	D 8	Y 1	Amount 230.00	
Full Name of Contributor Pujarini Datta					Registration Number, if PAC		
Street Address 2305 Meadow Village		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43235	M 0	D 9	Y 0	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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 1,350.00