



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Jessica Saad				
Full Name of Contributor Jennifer Avoli			Registration Number, if PAC	
Street Address 2474 Elm Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic transfer
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09 29 19	Amount 10.00
Full Name of Contributor Ashley Reiner			Registration Number, if PAC	
Street Address 51 N Remington		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic transfer
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09 23 19	Amount 10.00
Full Name of Contributor Jessica G. King			Registration Number, if PAC	
Street Address 135 E Kossuth St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic transfer
City Columbus	State OH	Zip Code 43206	Date (MM/DD/YYYY) 09 22 19	Amount 50.00
Full Name of Contributor Gretchen Feldmann			Registration Number, if PAC	
Street Address 127 S Remington		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic transfer
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09 21 19	Amount 50.00
Full Name of Contributor Angela Yock			Registration Number, if PAC	
Street Address 2240 Bryden Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic transfer
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09 17 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)]