OFFICE OF THE
Ohio Secretary of State

Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee
Friends of Meredith Lawson-Rowe

Full Name of Contributor		Registration Number, if PAC
Clara Hawkins		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
529 E. Liberty St.	unknown	check

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Springfield	OH	45505	08/04/2019	$25.00

Full Name of Contributor		Registration Number, if PAC
David Bentley		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
3114 Heather Glen	unknown	credit card

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Springfield	OH	45503	08/07/2019	$50.00

Full Name of Contributor		Registration Number, if PAC
Diane Turner-Sharazz		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
3843 Ocana Ave.	unknown	check

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Long Beach	CA	90808	08/07/2019	$100.00

Full Name of Contributor		Registration Number, if PAC
Denny Wojtanowshi		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
10 Park Dr.	unknown	credit card

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Columbus	OH	43209	08/14/2019	$50.00

Full Name of Contributor		Registration Number, if PAC
Meredith Lawson-Rowe		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
2100 Belltree Dr.	executive asst.	credit card

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Reynoldsburg	OH	43068	08/15/2019	$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)]

Page Total $250.00