



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
Friends of Anthony Caldwell					
Full Name of Contributor				Registration Number, if PAC	
Andrew Hamilton					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
1650 Havard St. NW #717	SEIU				Online
City	State	,			Amount
Washington	DC -	2009	6-8	- 19	65.00
Full Name of Contributor				Registration Numb	er, if PAC
Daniel O' Malley					
Street Address	Employer/Occupation/Labor Organization*			-	Form (Cash, Check, etc.)
12900 Lake Ave #1408	Cit	City of Lakewood /Councilman			
City	State	1	Date (MM/DI		Amount
Lakewood	OH 🛨	44107	6-8-	19	25.00
Full Name of Contributor	Registration Nu				er, if PAC
David Donofrio					
Street Address	Employer	/Occupation/Labor Or	ganization*		Form (Cash, Check, etc.)
298 Carilla Lane	Pro	aire Twp	Ohio	<i>9</i>	online
City	State		Date (MM/DI		Amount
Columbus	OH 🔻	43228	6-9-	-19	25
Full Name of Contributor	Registrati			Registration Numb	er, if PAC
Hina Scholman					
Street Address	Employer	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
20 Terrace Walk	S	SEIU			Online
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Berkeley	CA 🖸	94707	6-ZS	- 19	(00.00
Full Name of Contributor	Registration N			Registration Numb	er, if PAC
Nancy Day-Achaver					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
5951 Luccis Ct.	Cle	Clergy /UMC			Online
	State				Amount
Columbus	OH -	43228	43228 6-26-19		25.00

Page Total 240.00

^{*}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)]