



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee			<u> </u>		
Jadwin for Gahanna					
Full Name of Contributor Registration Num					er, if PAC
Brian Whitlatch					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
611 Laurel Ridge Dr.					Check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Gahanna	ОН	43230	04/02/2019		250.00
Full Name of Contributor	,			Registration Number	er, if PAC
Thomas W. Schneider					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
790 Hawks Crest Ln.		Check			
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Blacklick	ОН	43224	04/03/2019		250.00
Full Name of Contributor	Registration Numb				er, if PAC
Laurie A. Jadwin					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
1222 Pond Hollow Ln.					Card
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
New Albany	ОН	43054	04/01/2019		25.00
Full Name of Contributor				Registration Numb	er, if PAC
Pam Brown					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
1820 N Columbus St.	Card				
City	State	Zip Code	Date (MM/D	D/YYY)	Amount
Lancaster	ОН	43130		04/03/2019	50.00
Full Name of Contributor	Registration Numb				er, if PAC
Greg Eyerman					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
2697 Nicole Lynn Place					
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Reynolsburg	ОН	43068		04/03/2019	25.00

Page Total	600.00
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^{*}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)]