



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
Jadwin for Gahanna					
Full Name of Contributor Registration Numb					er, if PAC
Michael Underwood			į		
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
891 Dark Star ave.					check
City	State	Zip Code	Date (MM/DI	DMYYY)	Amount
Gahanna	ОН	43230		10/31/2019	100.00
Full Name of Contributor				Registration Number	er, if PAC
Thomas Kneeland					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
123 Serran Dr.	cher				check
City	State	Zip Code	Date (MM/DI	DYYYY)	Amount
Gahanna	ОН	43230		10/20/2019	100.00
Full Name of Contributor	Registration Numb				er, if PAC
John Rosan					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
192 Farmwood Place					check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Gahanna	ОН	43230		10/29/2019	250.00
Full Name of Contributor Registration Numb					er, if PAC
Matthew Borges					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
2753 Sherwood Rd	check				
City	State	Zip Code	Date (MM/D	D/YYY)	Amount
Bexley	ОН	43209		10/22/2019	250.00
Full Name of Contributor	Registration Number				er, if PAC
Contributions from form 31-E					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code Date (MM/DD/YYYY)		Amount	
			10/24/2019		5325.00
	i	l	l		

*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	6025.00