

## Statement of Contributions Received

Form 31-A

ORC 3517 10

					ORC 3317.10	
Full Name of Committee						
Fortkamp for UA						
Full Name of Contributor	lame of Contributor				Registration Number, if PAC	
marianne Mitchell						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
1858 Guilford Rd.	State	State Zip Code Date (MM/DD/YYYY)			Card Amount	
·	0H 🔽	43221	,		\$75.00	
COLUMBUS	OFI	93221	08106/2019		·	
Full Name of Contributor				Registration Numb	per, if PAC	
Max Laird						
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
4580 Langport Rd					card	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Columbus	OH 🔽	43220	0810	4/2019	\$100.00	
Full Name of Contributor	Registration Number			per, if PAC		
Emily DOW				Ē 4		
Street Address	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
1437 La Vista Ter					Card	
City	State C A	Zip Code	Date (MM/DD/YYYY)		Amount	
Giendale	GANG -	91208	0810	3/2019	\$ 25.00	
Full Name of Contributor		Registration Num			per, if PAC	
Brian McClure						
Street Address ·	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
3308 N Damen Ave.					card	
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
Chicago	15	60618	07   3	12019	\$250.00	
Full Name of Contributor	Registration Num			ber, if PAC		
Mary Beth Smith				:		
Street Address	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
2041 Westover Rd.				Card		
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Columbus	OH ▼	43221	0711912019		\$50.00	

\*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)]

