



# Statement of Contributions Received

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Friends of Stasi Trout					
Full Name of Contributor Libby Gierach				Registration Number, if PAC	
Street Address 4633 Community Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check
City Hilliard	State OH	Zip Code 43026	Date (MM/DD/YYYY) 09/13/2019	Amount \$150.00	
Full Name of Contributor Rhonda Lewis				Registration Number, if PAC	
Street Address 3767 Confluence Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) pay pal
City Hilliard	State OH	Zip Code 43026	Date (MM/DD/YYYY) 09/14/2019	Amount \$48.25	
Full Name of Contributor Custom Ink LLC				Registration Number, if PAC	
Street Address 2910 District Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check
City Fairfax	State VA	Zip Code 22031	Date (MM/DD/YYYY) 09/18/2019	Amount \$140.94	
Full Name of Contributor Tracey Smallwood				Registration Number, if PAC	
Street Address 6344 Dan Sherri Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) pay pal
City Dublin	State OH	Zip Code 43016	Date (MM/DD/YYYY) 09/21/2019	Amount \$9.41	
Full Name of Contributor Jennifer Eckels				Registration Number, if PAC	
Street Address 5 McCormick Trail		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) pay pal
City Milford	State OH	Zip Code 45150	Date (MM/DD/YYYY) 09/21/2019	Amount \$96.80	

\*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)]