



Statement of Contributions Received

Form 31-A

ORC 3517.10

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···········		·	Registration Numb	er, if PAC
Employe	/Occupation/Labor Or	ganization*		Form (Cash, Check, etc.)
SEIU				online
State	zate Zip Code Date (MM/DD/YYYY)		D/YYYY)	Amount
汉旦	78745	6-26-19		25.00
			Registration Numb	er, if PAC
Employer	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
U	FCW 1	W 1059 C		Online
State	Zip Code	Date (MM/DD/YYYY) Amount		Amount
OH 	43004	6-26-19 25-00		
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Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)				
Sŧ	SETU ON			online
State	Zip Code	,		. I
IL 🔼	60430	6-28-19 50.00		
		Registration Number, if PAC		
Employer	/Occupation/Labor Or	ganization*		Form (Cash, Check, etc.)
L	Brands			online
State	Zip Code	· ·		Amount
OH 🔄	43082	6-30	-19	25.00
			Registration Numb	er, if PAC
Employer	/Occupation/Labor Or	ganization*		Form (Cash, Check, etc.)
Retired		online		
OH 🔻	43123	7-29	5-19	50.00
	Employer State TX Employer State CH Employer State CH Employer State CH State	State Zip Code TX	Employer/Occupation/Labor Organization* SELU State Zip Code Date (MM/D 78745 6-ZG Employer/Occupation/Labor Organization* UFCW US9 State Zip Code Date (MM/D 6-ZG M' Employer/Occupation/Labor Organization* SEDU State Zip Code Date (MM/D CO430 6-ZE Employer/Occupation/Labor Organization* L Brands State Zip Code Date (MM/D 6-30 Employer/Occupation/Labor Organization* L Brands State Zip Code Date (MM/D H 93082 6-30 Employer/Occupation/Labor Organization* Refired State Zip Code Date (MM/D Date (MM/D) Date (MM/D)	Employer/Occupation/Labor Organization* SEIU State Zip Code Date (MM/DD/YYYY) 78745 6-Z6-19 Registration Numb Employer/Occupation/Labor Organization* UFCW US9 State Zip Code Date (MM/DD/YYYY) C-Z6-19 Registration Numb Employer/Occupation/Labor Organization* SEDU State Zip Code Date (MM/DD/YYYY) C-Z8-19 Registration Numb Employer/Occupation/Labor Organization* L Brands State Zip Code Date (MM/DD/YYYY) C-30-19 Registration Numb Employer/Occupation/Labor Organization* L Brands State Zip Code Date (MM/DD/YYYY) C-30-19 Registration Numb Employer/Occupation/Labor Organization* Registration Numb

*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)]

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