



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of PR Casey				
Full Name of Contributor Todd A. Treeger			Registration Number, if PAC	
Street Address 1409 Kinnards PL		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State	Zip Code 43235	Date (MM/DD/YYYY) 09/13/2017	Amount \$50.00
Full Name of Contributor Peter R. Casey III			Registration Number, if PAC	
Street Address 525 Rutledge Ct		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Perrysburg	State	Zip Code 43551	Date (MM/DD/YYYY) 09/14/2017	Amount \$100.00
Full Name of Contributor Clint B. Charnes			Registration Number, if PAC	
Street Address 343 W South St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Worthington	State	Zip Code 43085	Date (MM/DD/YYYY) 09/18/2017	Amount \$100.00
Full Name of Contributor Mara Byrne			Registration Number, if PAC	
Street Address 45-23 41st St, Apt 1-R		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic Paypal donation
City Sunnyside	State NY	Zip Code 11104	Date (MM/DD/YYYY) 09/19/2017	Amount \$50.00
Full Name of Contributor Christopher Scott			Registration Number, if PAC	
Street Address 6085 Olentangy River Rd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Worthington	State	Zip Code 43085	Date (MM/DD/YYYY) 09/18/2017	Amount \$500.00

*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)]