



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Friends of Neal Whitman				
Full Name of Contributor Frances Whitman			Registration Number, if PAC	
Street Address 4517 Staten Island Ct		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal
City Plano	State TX	Zip Code 75024	Date (MM/DD/YYYY) 07/20/2019	Amount 250.00
Full Name of Contributor Aubrey Gibson			Registration Number, if PAC	
Street Address 8165 Priestley Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 07/29/2019	Amount 40.00
Full Name of Contributor Jeannette Kuder			Registration Number, if PAC	
Street Address 1209 Fletcher Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/14/2019	Amount 25.00
Full Name of Contributor Pam Bivona			Registration Number, if PAC	
Street Address 7908 Windrift Pl		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/15/2019	Amount 20.00
Full Name of Contributor Shannon Washington			Registration Number, if PAC	
Street Address 7975 Windrift Pl		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/15/2019	Amount 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)]

Page Total 385.00