



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
FRIENDS OF SETH KRAUT					4
Full Name of Contributor Registration Number					er, if PAC
JASON MARSHALL					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
1233 COLSTON DR					PAYPAL
City	State	Zip Code Date (MM/DD/YYYY)			Amount
WESTERVILLE	он 🔻	43081	11/29/2019		\$25.00
Full Name of Contributor				Registration Number	er, if PAC
JEN ARDEN					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
6767 BOWERMAN CT	ACTBLUE				
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
WORTHINGTON	ОН 🔻	43085	12/01/2019		\$100.00
Full Name of Contributor Registration Number					er, if PAC
MATT GREGORY					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
48 HOWARD AVE					PAYPAL
City	State	Zip Code	Code Date (MM/DD/YYYY)		Amount
WORTHINGTON	он 🔻	43085		12/01/2019	\$100.00
Full Name of Contributor			•	Registration Number	er, if PAC
CHRISTOPHER JUDD					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
685 FARRINGTON	PAYPAL				
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
WORTHINGTON	он 🔽	43085		12/01/2019	\$100.00
Full Name of Contributor	Registration Numb				er, if PAC
EDWARD PAULINE					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
949 ROBBINS WAY	PAYPAL				
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
WORTHINGTON	он 🔻	43085	11/29/2019 \$100.00		

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^{*}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)]