



Full Name of Committee Friends of Vashitta Johnson				
Full Name of Contributor Carolyn Casper			Registration Number, if PAC	
Street Address 2545 Northwest Blvd		Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) (cc) Online + check
City Upper arlington	State OH ☒	Zip Code 43221	Date (MM/DD/YYYY) 05/04/2019	Amount \$200.00
Full Name of Contributor Renee Delane			Registration Number, if PAC	
Street Address 5831 Willow Bend Ln		Employer/Occupation/Labor Organization* Self-Employed - ^{women who} care		Form (Cash, Check, etc.) Online (credit)
City Westerville	State OH ☒	Zip Code 43082	Date (MM/DD/YYYY) 05/05/2019	Amount \$100.00
Full Name of Contributor Dona Kristiba Joi Morgan			Registration Number, if PAC	
Street Address 3305 8 th St NE apt 408		Employer/Occupation/Labor Organization* Pianist		Form (Cash, Check, etc.) Online - CC
City Washington	State DC ☒	Zip Code 20017	Date (MM/DD/YYYY) 05/08/2019	Amount \$100.00
Full Name of Contributor Gloria Howie			Registration Number, if PAC	
Street Address 4025 oak st		Employer/Occupation/Labor Organization* Teacher (Retired + present)		Form (Cash, Check, etc.) Online - Card
City Lowellville	State OH ☒	Zip Code 44436	Date (MM/DD/YYYY) 05-08-2019	Amount \$20.00
Full Name of Contributor Tamara murray			Registration Number, if PAC	
Street Address 5690 Great Hall Ct		Employer/Occupation/Labor Organization* Library staff		Form (Cash, Check, etc.) Online
City Columbus	State OH ☒	Zip Code 43231	Date (MM/DD/YYYY) 05/10/2019	Amount \$25.00

*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)]