



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Friends of Merisa Bowers				
Full Name of Contributor Mellissia Fuhrmann <i>Also on Form 31-E</i>			Registration Number, if PAC	
Street Address 1849 Willoway Circle N.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43220	Date (MM/DD/YYYY) 07/23/2019	Amount 50.00
Full Name of Contributor Jessica D'Varga <i>Also on Form 31-E</i>			Registration Number, if PAC	
Street Address 4100 Pegg Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43214	Date (MM/DD/YYYY) 07/23/2019	Amount 50.00
Full Name of Contributor Bryan Griffith <i>Also on Form 31-E</i>			Registration Number, if PAC	
Street Address 6465 Martin Place		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Dublin	State OH	Zip Code 43017	Date (MM/DD/YYYY) 07/19/2019	Amount 200.00
Full Name of Contributor Larry Hayman <i>Also on Form 31-E</i>			Registration Number, if PAC	
Street Address 1112 Perry Street Unit #		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Columbus	State OH	Zip Code 43201	Date (MM/DD/YYYY) 07/23/2019	Amount 50.00
Full Name of Contributor John P. Johnson Law Office LLC <i>Also on Form 31-E</i>			Registration Number, if PAC	
Street Address 501 S. High Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 07/23/2019	Amount 150.00

*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)]