



## **Statement of Contributions Received**

Form 31-A

ORC 3517 10

					ORC 3517.10
Full Name of Committee					
Friends of Tina Pierce					
Full Name of Contributor Registration Number					er, if PAC
Contributions from Form No. 31-E 04/13/2019 Pag	e 2				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
	OH ▼			04/13/2019	\$250.00
Full Name of Contributor			^ <del></del>	Registration Number	er, if PAC
Contributions from Form No. 31-E 04/13/2019 Pag	e 3				
Street Address	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
	OH ▼			04/13/2019	\$170.00
Full Name of Contributor	Registration Numb			er, if PAC	
Contributions from Form No. 31-E 04/14/2019 Pag	<b>e</b> 1				
Street Address	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
	OH ▼			04/14/2019	\$140.00
Full Name of Contributor		<del></del>	<u> </u>	Registration Number	er, if PAC
Contributions from Form No. 31-E 04/14/2019 Page 2					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/D	D/YYY)	Amount
	ОН ▼			04/14/2019	\$23.00
Full Name of Contributor	Registration Numb			er, if PAC	
Contributions from Form No. 31-E 05/23/2019 Page 1					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY) Amou		Amount
	он 🔻			05/23/2019	372.22

\*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)]

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