



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Merisa Bowers				
Full Name of Contributor Brian Breiding			Registration Number, if PAC	
Street Address 3482 Columbus Rd. N.E.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Canton	State OH	Zip Code 44708	Date (MM/DD/YYYY) 08/25/2019	Amount 50.00
Full Name of Contributor John Spinelli			Registration Number, if PAC	
Street Address 97 Southwind Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 08/25/2019	Amount 250.00
Full Name of Contributor Sarah Skonezney			Registration Number, if PAC	
Street Address 140 Windrow Court		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 08/26/2019	Amount 100.00
Full Name of Contributor Peggy Anderson			Registration Number, if PAC	
Street Address 581 East Weisheimer Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Columbus	State OH	Zip Code 43214	Date (MM/DD/YYYY) 08/27/2019	Amount 75.00
Full Name of Contributor Fitzrakis & Gadell-Newton, LLC			Registration Number, if PAC	
Street Address 1021 East Broad Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Columbus	State OH	Zip Code 43205	Date (MM/DD/YYYY) 08/27/2019	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 525.00