



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Friends of Tina Pierce				
Full Name of Contributor Contributions from form No. 31-E page 1			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State <input type="checkbox"/>	Zip Code	Date (MM/DD/YYYY) 10/28/2019	Amount \$890.00
Full Name of Contributor Contributions from form No. 31-E page 2			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State <input type="checkbox"/>	Zip Code	Date (MM/DD/YYYY) 10/28/2019	Amount \$535.00
Full Name of Contributor Contributions from form No. 31-E page 3			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State <input type="checkbox"/>	Zip Code	Date (MM/DD/YYYY) 10/28/2019	Amount \$52.23
Full Name of Contributor Lisa Hinkelman			Registration Number, if PAC	
Street Address 581 River Pebble Drive		Employer/Occupation/Labor Organization* ROX		Form (Cash, Check, etc.) Donorbox
City Blacklick	State OH <input type="checkbox"/>	Zip Code 43004	Date (MM/DD/YYYY) 10/29/2019	Amount \$52.23
Full Name of Contributor Teamsters Local Union No. 413			Registration Number, if PAC	
Street Address 555 E Rich Street Suite 103		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH <input type="checkbox"/>	Zip Code 43215	Date (MM/DD/YYYY) 10/29/2019	Amount \$250.00

*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 \$1,779.46