



Statement of Contributions Received

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Campaign Finance | (614) 466-3111
www.OhioSecretaryofState.gov
cfinance@OhioSecretaryofState.gov

Form 31-A

ORC 3517.10

Full Name of Committee FRIENDS of Loni J. Elmore				
Full Name of Contributor Kenneth + Elise Wilson			Registration Number, if PAC	
Street Address 671 Emmonwood		Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) ch
City Whitehall	State OH	Zip Code 43213	Date (MM/DD/YYYY) 10/2/2017	Amount 100.00
Full Name of Contributor KAREN GASPER			Registration Number, if PAC	
Street Address 893 Ebner		Employer/Occupation/Labor Organization* UFCW OPERATIONS		Form (Cash, Check, etc.) ch
City Cols	State OH	Zip Code 43206	Date (MM/DD/YYYY) 10/12/2017	Amount 50.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount

*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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