



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Merisa Bowers				
Full Name of Contributor Olivia Zoller Smith			Registration Number, if PAC	
Street Address 123 Boggs Lane	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal	
City Cincinnati	State OH	Zip Code 45246	Date (MM/DD/YYYY) 07/26/2019	Amount 50.00
Full Name of Contributor Brittaney Gonzalez			Registration Number, if PAC	
Street Address 570 Woodmark Run	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal	
City Columbus	State OH	Zip Code 43230	Date (MM/DD/YYYY) 07/27/2019	Amount 30.00
Full Name of Contributor Jamie Myers			Registration Number, if PAC	
Street Address 200 Carlin Court E.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) cash	
City Gahanna	State OH	Zip Code 43230	Date (MM/DD/YYYY) 07/27/2019	Amount 20.00
Full Name of Contributor Crysta Pennington			Registration Number, if PAC	
Street Address 4449 Easton Way, Fl.2	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43219	Date (MM/DD/YYYY) 07/27/2019	Amount 100.00
Full Name of Contributor Vashitta Johnson			Registration Number, if PAC	
Street Address 5514 Crenton Drive	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal	
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 07/28/2019	Amount 35.00

*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)]