



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Neighbors for Barga				
Full Name of Contributor Pat Starling			Registration Number, if PAC	
Street Address 7003 Roundelay Rd N.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 03/14/2019	Amount 100.00
Full Name of Contributor Mandy Young			Registration Number, if PAC	
Street Address 736 Lancaster Ave	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 03/14/2019	Amount 25.00
Full Name of Contributor Elane Tornero			Registration Number, if PAC	
Street Address 7716 Critwell Ct	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 03/11/2019	Amount 50.00
Full Name of Contributor Clarence Mingo			Registration Number, if PAC	
Street Address 12364 Thoroughbred Dr.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Pickerington	State OH	Zip Code 43147	Date (MM/DD/YYYY) 03/11/2019	Amount 100.00
Full Name of Contributor Rebecca Beauregard			Registration Number, if PAC	
Street Address 391 Bartlett Street unit 1	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Manchester	State NH	Zip Code 03102	Date (MM/DD/YYYY) 03/14/2019	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)]