



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee						
Friends of Anthony Caldwell						
Full Name of Contributor Reg				Registration Number	Registration Number, if PAC	
Jessica Neal						
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
536 Winslow Ave				online		
City	State	Zip Code Date (MM/DD/YYYY)			Amount	
Long Beach	CA	90814	10-	7-17	Sa. 00	
Full Name of Contributor				Registration Number	er, if PAC	
Billy Smerka Jr.						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
655 Poling Ave				on line		
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Westover	ST CO	26501	10-9	-17	10.60	
Full Name of Contributor Registration Number					er, if PAC	
Gena M. Shelton						
Street Address	Employer	Occupation/Labor Or	ganization*		Form (Cash, Check, etc.)	
509 Brevoort Road					online	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Columbus	ОН	43214	10-10-17		25.00	
Full Name of Contributor	Registration Numb				er, if PAC	
Amanda Hoyt						
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
35. Webster Park Ave				online		
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
Columbus	ОН	43214	10 -	11-17	75.60	
Full Name of Contributor	Registration Numb				er, if PAC	
Tierney Hout						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
1611 Hobart St. NW					online	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Washing ton	an pc	20009	10-11-17		150.00	

^{*}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)]