



Full Name of Committee David Donofrio for Ohio				
Full Name of Contributor Robert Humphrey			Registration Number, if PAC N/A	
Street Address 724 Binns Blvd		Employer/Occupation/Labor Organization* N/A		Form (Cash, Check, etc.) credit card
City Columbus	State OH	Zip Code 43204	Date (MM/DD/YYYY) 08/29/2017	Amount \$25.00
Full Name of Contributor Carolyn Elias			Registration Number, if PAC N/A	
Street Address 625 2nd St.		Employer/Occupation/Labor Organization* Self		Form (Cash, Check, etc.) check
City Hancock	State MN	Zip Code 56244	Date (MM/DD/YYYY) 08/29/2017	Amount \$25.00
Full Name of Contributor Andrew Merritt			Registration Number, if PAC N/A	
Street Address 2674 Queensway Dr		Employer/Occupation/Labor Organization* N/A		Form (Cash, Check, etc.) check
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 08/29/2017	Amount \$100.00
Full Name of Contributor Susan Donofrio			Registration Number, if PAC N/A	
Street Address 3244 W Case Rd		Employer/Occupation/Labor Organization* Legal Aid Society of Columbus		Form (Cash, Check, etc.) check
City Dublin	State OH	Zip Code 43017	Date (MM/DD/YYYY) 09/11/2017	Amount \$500.00
Full Name of Contributor Tina Maharath			Registration Number, if PAC N/A	
Street Address 6608 Mountain Ash Dr		Employer/Occupation/Labor Organization* N/A		Form (Cash, Check, etc.) credit card
City Canal Winchester	State OH	Zip Code 43110	Date (MM/DD/YYYY) 09/13/2017	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)]