



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends for Amy Lloyd				
Full Name of Contributor Anita Beck			Registration Number, if PAC n/a	
Street Address 6840 Downs St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 10/21/2019	Amount \$50.00
Full Name of Contributor Amy Mayo			Registration Number, if PAC n/a	
Street Address 241 E. North St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 10/22/2019	Amount \$25.00
Full Name of Contributor Emily Meadows			Registration Number, if PAC n/a	
Street Address 218 Heischman Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Worthington	State OH	Zip Code 43085	Date (MM/DD/YYYY) 10/27/2019	Amount \$20.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	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	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)]