



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
Friends of Doug Snyder					
Full Name of Contributor Registration Num					er, if PAC
Douglas R Snyder					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
7587 Walnut Dr					check
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Canal Winchester	ОН	43110		08/05/2019	100.00
Full Name of Contributor		<u> </u>		Registration Number	er, if PAC
John M Hummel					
Street Address	Employ	er/Occupation/Labo	Form (Cash, Check, etc.)		
9415 Bowen Rd			check		
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Canal Winchester	ОН	43110		08/15/2019	500.00
Full Name of Contributor	Registration Numb				er, if PAC
Richard A Noland					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
5120 Peach Canyon Dr					money order
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Canal Winchester	ОН	43110		08/15/2019	500.00
Full Name of Contributor				Registration Number	er, if PAC
Elizabeth M Wood					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
6681 Cherry Bnd	check				
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Canal Winchester	ОН	43110		08/16/2019	100.00
Full Name of Contributor	Registration Numl				er, if PAC
Leah Fearing					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
7139 Rosemount Way					cash
City	State	Zip Code	Date (MM/D		Amount
Canal Winchester	ОН	43110		08/25/2019	100.00

Page Total	\$1,300.00
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^{*}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)]