



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Supporters of Westerville Police				
Full Name of Contributor Holly Murchland			Registration Number, if PAC	
Street Address 3443 Ash Meadow Lane	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Franklin	State OH	Zip Code 45005	Date (MM/DD/YYYY) 08/12/2019	Amount \$250.00
Full Name of Contributor Charles Chandler			Registration Number, if PAC	
Street Address 406 Millson Dr	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Sunbury	State OH	Zip Code 43074	Date (MM/DD/YYYY) 08/12/2019	Amount \$250.00
Full Name of Contributor Eugene L Hollins			Registration Number, if PAC	
Street Address 7B N State Street	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 08/28/2019	Amount \$100.00
Full Name of Contributor Abercrombie & Fitch Management Co			Registration Number, if PAC	
Street Address 6301 Fitch Path	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City New Albany	State OH	Zip Code 43054	Date (MM/DD/YYYY) 08/28/2019	Amount \$500.00
Full Name of Contributor Central Ohio Primary Care			Registration Number, if PAC	
Street Address 655 Africa Road	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43082	Date (MM/DD/YYYY) 08/28/2019	Amount \$1000.00

*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)]