



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends For Perry				
Full Name of Contributor William M. Scarbrough			Registration Number, if PAC	
Street Address 1486 Virginia Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State Ohio	Zip Code 43212	Date (MM/DD/YYYY) 07/19/2019	Amount \$100.00
Full Name of Contributor Dave Pelletier			Registration Number, if PAC	
Street Address 4660 Crystal Ball Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) website
City Hilliard	State Ohio	Zip Code 43026	Date (MM/DD/YYYY) 07/29/2019	Amount \$5.00
Full Name of Contributor Dru Olding			Registration Number, if PAC	
Street Address 7243 Gablestone Ln.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) website
City New Albany	State Ohio	Zip Code 43054	Date (MM/DD/YYYY) 07/29/2019	Amount \$25.00
Full Name of Contributor Jennifer Hamilton			Registration Number, if PAC	
Street Address 2143 Tall Timbers Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) website
City Columbus	State Ohio	Zip Code 43228	Date (MM/DD/YYYY) 07/31/2019	Amount \$20.00
Full Name of Contributor Halli Levengood			Registration Number, if PAC	
Street Address 4115 Drake St. #5		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Website
City Houston	State Texas	Zip Code 77005	Date (MM/DD/YYYY) 08/05/2019	Amount \$100.00

*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)]