



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Neal Whitman				
Full Name of Contributor Aditi Kashyap			Registration Number, if PAC	
Street Address 8825 Bergenia Ct		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) cash
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/26/2019	Amount 50.00
Full Name of Contributor Renee Kelley			Registration Number, if PAC	
Street Address 7913 Windrift Pl		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/26/2019	Amount 10.00
Full Name of Contributor Angie Jenkins			Registration Number, if PAC	
Street Address 945 Mahle Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/26/2019	Amount 20.00
Full Name of Contributor Kelli Loeffler			Registration Number, if PAC	
Street Address 833 Sandrock Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/27/2019	Amount 25.00
Full Name of Contributor Julie Strohm			Registration Number, if PAC	
Street Address 1177 Creekside Pl		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 09/10/2019	Amount 25.00

*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)]

Page Total 130.00