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Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
Friends of Merisa Bowers					
					
Full Name of Contributor Registration Numb				er, if PAC	
Nancy Nader				<u></u>	
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
798 Wildwood Dr. N.E.	che				check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Warren	ОН	44483	06/20/2019		150.00
Full Name of Contributor		<u> </u>	Registration Numb		er, if PAC
Louis Khourey					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
254 Shawnee Road	check				check
City .	State	Zip Code	Date (MM/DD/YYYY)		Amount
Wheeling	w	26003		06/21/2019	400.00
Full Name of Contributor	ibutor Registration Number				er, if PAC
David Hanson					
Street Address	Employer/Occupation/Labor Organization*			!	Form (Cash, Check, etc.)
1061 City Park Ave.	,			PayPal	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Columbus	ОН	43206		06/23/2019	75.00
Full Name of Contributor		Registration Num			er, if PAC
Joiem Kawas					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
5922 31st Ave. S.W.	PayPal				
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Seattle	WA	98126	06/23/2019		100.00
Full Name of Contributor		<u> </u>		Registration Number	er, if PAC
Allison Warner					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
300 Snowshoe Drive					PayPal
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Southgate	KY	41071	06/23/2019 2		20.00

Page Total 745.00

^{*}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)]