

## **Statement of Contributions Received**

Form 31-A

ORC 3517.10

ull Name of Committee						
Valsh For Bexley						
Full Name of Contributor					egistration Number, if PAC	
pril Walsh						
reet Address Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
005 S Remington Rd					Venmo	
ity	State	Zip Code	Date (MM/DI	Date (MM/DD/YYYY) Amount		
exley	он	43209		08/14/2019 20.00		
ull Name of Contributor				Registration Number	r, if PAC	
iusan Hersh						
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
2559 Brentwood Road		Anedot				
Zity Zity	State	Zip Code	Date (MM/D		Amount	
Bexley	он	43209		08/16/2019	25.00	
Full Name of Contributor Registration Number					er, if PAC	
Darcy Shrimpf						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
341 S. Columbia					Venmo	
Zity	State	Zip Code	Date (MM/D	Date (MM/DD/YYYY) Amount		
Bexley	он	43209		08/20/2019 25.00		
Full Name of Contributor				Registration Numb	er, if PAC	
Troy Markham						
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
875 S. Remington Rd	Venmo					
City	State	Zip Code	Date (MM/I		Amount	
Bexley	он	43209		08/24/2019	25.00	
Full Name of Contributor	er, if PAC					
Dale Rucker						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
662 Vernon Rd					Check	
City	State	Zip Code	Date (MM/	Date (MM/DD/YYYY) Amount 200.00		
	ľ	43209	1			

\*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)]

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