



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Melissa Anderson				
Full Name of Contributor Claudia Kuznik			Registration Number, if PAC	
Street Address 3022 Grovewood Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic
City Parma	State OH	Zip Code 44134	Date (MM/DD/YYYY) 10/22/2019	Amount \$50.00
Full Name of Contributor Elizabeth Kal bouss			Registration Number, if PAC	
Street Address 1370 Wyandotte Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 10/18/2019	Amount \$100.00
Full Name of Contributor Patricia O'Brien			Registration Number, if PAC	
Street Address 1495 Cascade Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 10/23/2019	Amount \$50.00
Full Name of Contributor Amanda Ford do Small Tycoon			Registration Number, if PAC	
Street Address 2825 Woods Crescent		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 10/24/2019	Amount \$50.00
Full Name of Contributor Christine Houk			Registration Number, if PAC	
Street Address 2099 Stargrass Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) electronic
City Grove City	State OH	Zip Code 43123	Date (MM/DD/YYYY) 10/24/2019	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)]

\$350.00