



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
Reynoldsburg Area Democrats PAC					
Full Name of Contributor	Registration Number				er, if PAC
Mark Flaharty					
Street Address	Employer	/Occupation/Labor Or	ganization*		Form (Cash, Check, etc.)
761 Robbins Loop Ct					Cash
City	State	Zip Code	Date (MM/D	DYYYY)	Amount
Reynoldsburg	ОН	43068		08/29/2018	50.00
Full Name of Contributor		<u> </u>		Registration Number	er, if PAC
Cash Contributions at Event of \$25 or Less					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
					Cash
City	State	Zip Code	Date (MM/D	D/YYY)	Amount
·				08/29/2018	353.00
Full Name of Contributor		L	<u> </u>	Registration Number	er, if PAC
Responsible Reynoldsburg					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
7472 Broadwyn Dr	1			ı	88.37
City	State	Zip Code	Date (MM/D	D/YYY)	Amount
Reynoldsburg	ОН	43068		10/11/2018	Check
Full Name of Contributor		<u> </u>		Registration Numb	er, if PAC
Richard Diewald					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
6791 Bartlett Rd					Check
City	State	Zip Code	Date (MM/D	D/YYY)	Amount
Reynoldsburg	ОН	43068		12/26/2018	25.00
Full Name of Contributor				Registration Numb	er, if PAC
Jean Williams					
Street Address	Employer	/Occupation/Labor Or	ganization*	<u> </u>	Form (Cash, Check, etc.)
6367 Portsmouth Dr					Check
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Reynoldsburg	ОН	43068		12/26/2018	25.00

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^{*}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)]