



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Reynoldsburg Area Democrats PAC				
Full Name of Contributor Stacie A Baker			Registration Number, if PAC	
Street Address 1101 Bergenia Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 10/22/2019	Amount 50.00
Full Name of Contributor Friends of Bhuwan Pyakurel			Registration Number, if PAC	
Street Address 8386 Ashlynd Pl		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 10/22/2019	Amount 121.63
Full Name of Contributor Friends of Louis Salvati			Registration Number, if PAC	
Street Address 767 Tricolor Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 10/22/2019	Amount 121.63
Full Name of Contributor Friends for Sorenson			Registration Number, if PAC	
Street Address 2270 Ayers Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 10/22/2019	Amount 121.63
Full Name of Contributor Friends of Bhuwan Pyakurel			Registration Number, if PAC	
Street Address 8386 Ashlynd Pl		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 10/22/2019	Amount 1,000.00

*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)]