



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Friends of Brett Luzader				
Full Name of Contributor Richard Harris			Registration Number, if PAC	
Street Address 1100 Bedlington Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 03/12/2019	Amount \$100.00
Full Name of Contributor Victoria Cox			Registration Number, if PAC	
Street Address 2118 Stoney Creek Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 05/03/2019	Amount \$25.00
Full Name of Contributor Connie Turner			Registration Number, if PAC	
Street Address 7232 Gibson Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 06/07/2019	Amount \$50.00
Full Name of Contributor Les Somogyi			Registration Number, if PAC	
Street Address 6818 Wolcott Pl.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City New Albany	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/12/2019	Amount \$100.00
Full Name of Contributor Richard Hentz			Registration Number, if PAC	
Street Address 7433 Bryden Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/19/2019	Amount \$200.00

*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)]