



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Klingler for Bexley City Council				
Full Name of Contributor Noah Jones			Registration Number, if PAC	
Street Address 25 Bullitt Park Pl.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43209	Date (MM/DD/YYYY) 08/25/2019	Amount \$300.00
Full Name of Contributor Emily Johns			Registration Number, if PAC	
Street Address 2371 Bryden Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) venmo
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 08/25/2019	Amount \$100.00
Full Name of Contributor Erin Foster			Registration Number, if PAC	
Street Address 11399 Johnstown Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) paypal
City New Albany	State OH	Zip Code 43054	Date (MM/DD/YYYY) 08/29/2019	Amount \$50.00
Full Name of Contributor Mark Klingler			Registration Number, if PAC	
Street Address 6799 Ravens Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Blacklick	State OH	Zip Code 43004	Date (MM/DD/YYYY) 08/29/2019	Amount \$100.00
Full Name of Contributor Dominic Musto			Registration Number, if PAC	
Street Address 3001 Gillham Rd. #103		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) venmo
City Kansas City	State MO	Zip Code 64108	Date (MM/DD/YYYY) 08/29/2019	Amount \$69.00

*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)]

Page Total **\$619.00**