



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Jenkins for Reynoldsburg				
Full Name of Contributor Jeffrey Bing			Registration Number, if PAC	
Street Address 8900 Taylor Woods Dr.		Employer/Occupation/Labor Organization* unknown		Form (Cash, Check, etc.) cash
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 09/27/2019	Amount \$50.00
Full Name of Contributor Michael Silberstein			Registration Number, if PAC	
Street Address 1093 Fountain Lane		Employer/Occupation/Labor Organization* unknown		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43213	Date (MM/DD/YYYY) 10/03/2019	Amount \$50.00
Full Name of Contributor Okwudi Anekwe			Registration Number, if PAC	
Street Address 172 Reinhard Ave.		Employer/Occupation/Labor Organization* unknown		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43206	Date (MM/DD/YYYY) 10/09/2019	Amount \$75.00
Full Name of Contributor Licking County Democratic Club			Registration Number, if PAC	
Street Address P.O. Box 4883		Employer/Occupation/Labor Organization* N/A		Form (Cash, Check, etc.) check
City Newark	State OH	Zip Code 43058	Date (MM/DD/YYYY) 10/09/2019	Amount \$100.00
Full Name of Contributor Johnnie Allen			Registration Number, if PAC	
Street Address 6068 Hilmar Dr.		Employer/Occupation/Labor Organization* unknown		Form (Cash, Check, etc.) cash
City Westerville	State OH	Zip Code 43082	Date (MM/DD/YYYY) 10/09/2019	Amount \$50.00

*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)]