



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Jenkins for Reynoldsburg				
Full Name of Contributor Friends of Erica Crawley			Registration Number, if PAC	
Street Address 78 E. Chestnut St., Apt. 301		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 04/25/2019	Amount \$100.00
Full Name of Contributor Shamika Johnson			Registration Number, if PAC	
Street Address 1 Bud Lane, Apt. 5		Employer/Occupation/Labor Organization* unknown		Form (Cash, Check, etc.) cash
City Milton	State WV	Zip Code 25541	Date (MM/DD/YYYY) 04/30/2019	Amount \$50.00
Full Name of Contributor Norma Smith			Registration Number, if PAC	
Street Address 3922 Warwick Ave.		Employer/Occupation/Labor Organization* unknown		Form (Cash, Check, etc.) check
City Cincinnati	State OH	Zip Code 45229	Date (MM/DD/YYYY) 05/12/2019	Amount \$50.00
Full Name of Contributor Angie's mom			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) cash
City	State OH	Zip Code	Date (MM/DD/YYYY) 05/12/2019	Amount \$6.00
Full Name of Contributor Douglas Andrews			Registration Number, if PAC	
Street Address 179 Springbrook Ct.		Employer/Occupation/Labor Organization* unknown		Form (Cash, Check, etc.) credit card
City Columbus	State OH	Zip Code 43230	Date (MM/DD/YYYY) 07/16/2019	Amount \$25.00

*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)]