



# Statement of Contributions Received

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Reynoldsburg Area Democrats PAC				
Full Name of Contributor Friends of Debbie Dunlap			Registration Number, if PAC	
Street Address 922 McCarrick Ct	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 10/22/2019	Amount 350.00
Full Name of Contributor Friends of Debbie Dunlap			Registration Number, if PAC	
Street Address 922 McCarrick Ct	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 Neal Whitman			Registration Number, if PAC	
Street Address 7916 Windrift 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 Franklin Davis			Registration Number, if PAC	
Street Address 7972 Fenway Cir	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 10/23/2019	Amount 70.00
Full Name of Contributor Jenkins for Reynoldsburg			Registration Number, if PAC	
Street Address 945 Mahle Dr	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 10/25/2019	Amount 440.12

\*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)]