



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Reynolds for Grandview				
Full Name of Contributor Contributions from Form No. 31-E (04/29/2019)				Registration Number, if PAC
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY)	Amount \$520.00
Full Name of Contributor Contributions from Form No. 31-E (10/11/2019)				Registration Number, if PAC
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY)	Amount \$100.00
Full Name of Contributor Crystal Dyckes				Registration Number, if PAC
Street Address 1285 Inglis Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Grandview Heights	State OH	Zip Code 43212	Date (MM/DD/YYYY) 04/30/2019	Amount \$100.00
Full Name of Contributor Richard Faris				Registration Number, if PAC
Street Address 1173 Northwest Blvd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Grandview Heights	State OH	Zip Code 43212	Date (MM/DD/YYYY) 06/03/2019	Amount \$50.00
Full Name of Contributor Crystal Dyckes				Registration Number, if PAC
Street Address 1285 Inglis Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Grandview Heights	State OH	Zip Code 43212	Date (MM/DD/YYYY) 09/15/2019	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)]