



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Jenkins for Reynoldsburg				
Full Name of Contributor Douglas Andrews			Registration Number, if PAC	
Street Address 179 Springbrook Dr.		Employer/Occupation/Labor Organization* unknown		Form (Cash, Check, etc.) credit card
City Columbus	State OH	Zip Code 43230	Date (MM/DD/YYYY) 04/08/2019	Amount \$25.00
Full Name of Contributor Julia Hairston			Registration Number, if PAC	
Street Address 214 Hastings St.		Employer/Occupation/Labor Organization* unknown		Form (Cash, Check, etc.) check
City Cincinnati	State OH	Zip Code 45219	Date (MM/DD/YYYY) 04/12/2019	Amount \$250.00
Full Name of Contributor Jean Williams			Registration Number, if PAC	
Street Address 6367 Portsmouth Dr.		Employer/Occupation/Labor Organization* retired		Form (Cash, Check, etc.) check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 04/17/2019	Amount \$25.00
Full Name of Contributor Stonewall Democrats of Central Ohio			Registration Number, if PAC	
Street Address 340 E. Fulton St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 04/21/2019	Amount \$100.00
Full Name of Contributor Jacqueline Bennett			Registration Number, if PAC	
Street Address 7851 Meadowlark Lane S.		Employer/Occupation/Labor Organization* unknown		Form (Cash, Check, etc.) check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 04/23/2019	Amount \$35.00

*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)]