Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
Reynoldsburg Area Democrats PAC					

Full Name of Contributor				Registration Number, if PAC	
Charles Kirk/Get Mad LLC					

Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
6790 Tanya Ter				Check	

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Reynoldsburg	OH	43068	03/04/2019	50.00

Full Name of Contributor				Registration Number, if PAC	
Christopher Marlowe Shook					

Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
572 Hunnicut Dr				Check	

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Reynoldsburg	OH	43068	03/03/2019	50.00

Full Name of Contributor				Registration Number, if PAC	
Lisa M Shook					

Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
573 Hunnicut Dr				Check	

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Reynoldsburg	OH	43068	03/05/2019	50.00

Full Name of Contributor				Registration Number, if PAC	
Bhuwan Pyakurel					

Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
2450 Goldengate Sq S Apt 8				Check	

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Reynoldsburg	OH	43068	03/05/2019	50.00

Full Name of Contributor				Registration Number, if PAC	
Roger V Cruse					

Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
989 Hillridge Rd				Check	

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Reynoldsburg	OH	43068	03/05/2019	20.00

*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)]

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