



**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 Louis Salvati			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City	State OH	Zip Code	Date (MM/DD/YYYY) 08/07/2019	Amount 80.10
Full Name of Contributor Friends of Bhuwan Pyakurel			Registration Number, if PAC	
Street Address 8386 Ashlynd Pl		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/07/2019	Amount 56.36
Full Name of Contributor Marcia J Phelps			Registration Number, if PAC	
Street Address 205 Gladys Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Newark	State OH	Zip Code 43055	Date (MM/DD/YYYY) 08/06/2019	Amount 100.00
Full Name of Contributor Bill Hedrick			Registration Number, if PAC	
Street Address 535 W 1st Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 10/25/2019	Amount 100.00
Full Name of Contributor Friends of Bhhuwan Pykurel			Registration Number, if PAC	
Street Address 8386 Ashlynd Pl		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 10/21/2019	Amount 1,000.00

\*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)]