



**Statement of Contributions Received**

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Reynoldsburg Area Democrats PAC				
Full Name of Contributor Jeniffer L Quesenberry			Registration Number, if PAC	
Street Address 949 Lancaster Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/08/2019	Amount 25.00
Full Name of Contributor Jenkis 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) 08/08/2019	Amount 77.48
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) 08/08/2019	Amount 48.00
Full Name of Contributor Meredith R Rowe			Registration Number, if PAC	
Street Address 2100 Belltree Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/08/2019	Amount 30.00
Full Name of Contributor Kristin J Bryant			Registration Number, if PAC	
Street Address 387 Cheyenne Way		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 08/08/2019	Amount 40.00

\*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)]