



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Klingler for Bexley City Council				
Full Name of Contributor Aron Rogers			Registration Number, if PAC	
Street Address 2460 Seneca Park Pl		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) paypal
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09/14/2019	Amount \$50.00
Full Name of Contributor Aaron Bucco			Registration Number, if PAC	
Street Address 2354 Bexley Park Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) paypal
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09/16/2019	Amount \$100.00
Full Name of Contributor Jackie Jacobs			Registration Number, if PAC	
Street Address 2461 Bryden Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09/23/2019	Amount \$100.00
Full Name of Contributor Denny Devine			Registration Number, if PAC	
Street Address 296 W. Remington Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) venmo
City Bexley	State OH	Zip Code 43209	Date (MM/DD/YYYY) 10/04/2019	Amount \$75.00
Full Name of Contributor Kyle Klingler			Registration Number, if PAC	
Street Address 42 King Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) cash
City Newark	State OH	Zip Code 43055	Date (MM/DD/YYYY) 10/04/2019	Amount \$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)]