



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Families for Mandy Young				
Full Name of Contributor Mandy Young			Registration Number, if PAC	
Street Address 736 Lancaster Ave		Employer/Occupation/Labor Organization* KinderCare		Form (Cash, Check, etc.) Cash
City Reynoldsburg	State Oh	Zip Code 43068	Date (MM/DD/YYYY) 08/24/2019	Amount \$50.00
Full Name of Contributor Reynoldsburg Republican Club			Registration Number, if PAC	
Street Address 11675 Haft Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State Oh	Zip Code 43068	Date (MM/DD/YYYY) 09/05/19	Amount \$500.00
Full Name of Contributor Lauren Spalding			Registration Number, if PAC	
Street Address 1940 Glenford Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State Oh	Zip Code 43068	Date (MM/DD/YYYY) 9/24/2019	Amount \$100.00
Full Name of Contributor William Schuck			Registration Number, if PAC	
Street Address 1322 Lancaster Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Paypal Online Credit
City Reynoldsburg	State Oh	Zip Code 43068	Date (MM/DD/YYYY) 9/15/19	Amount \$10.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY)	Amount

*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)]

Page Total \$660.00