

OFFICE OF THE Ohio Secretary of State

Statement of Contributions Received

Form 31-A

Full Name of Committee					
Citizens for Joe Bizjak					
Full Name of Contributor Registration N				Registration Number	er, if PAC
Donald Kenney					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
470 Olde Worthington Rd.					Check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Westerville	ОН	43082	01/30/2019		100.00
Full Name of Contributor	Registration Number				er, if PAC
vis Whitt					:
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
5892 E. 950th Ave.					Check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Altamont	IL			01/30/2019	25.00
Full Name of Contributor Registration Number					er, if PAC
John Rees					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
714 Arbors Cir.					Check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Gahanna	ОН	43232	01/30/2019		30.00
Full Name of Contributor Registration Number					er, if PAC
Brad McCloud					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
912 Rosehill Rd.					Check
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Reynoldsburg	ОН	43068		01/30/2019	250.00
Full Name of Contributor	Registration Number				er, if PAC
Robert Barga					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
1589 Stouder Dr.					Cash
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Reynoldsburg	ОН	43068	01/30/2019		100.00

Page Total 505.00

^{*}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)]