



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Joe Bizjak				
Full Name of Contributor Betty Montgomery			Registration Number, if PAC	
Street Address 1164 Dawn Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 01/30/2019	Amount 150.00
Full Name of Contributor Andrew Havas			Registration Number, if PAC	
Street Address 1900 Aschinger Blvd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 01/31/2019	Amount 100.00
Full Name of Contributor Rhett Ricart			Registration Number, if PAC	
Street Address 661 Dennison Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 01/31/2019	Amount 250.00
Full Name of Contributor Stephen Cicak			Registration Number, if PAC	
Street Address 6866 Roundelay Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 02/03/2019	Amount 100.00
Full Name of Contributor Christine Francisco			Registration Number, if PAC	
Street Address 6329 Chestnut Hills Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Parma	State OH	Zip Code 44129	Date (MM/DD/YYYY) 02/06/2019	Amount 50.00

*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)]