



## **Statement of Contributions Received**

Form 31-A ORC 3517.10

Campaign Finance | (614) 466-3111 www.OhioSecretaryofState.gov cfinance@OhioSecretaryofState.gov

		-			
Full Name of Committee Citizens for Alex				<del> </del>	
Full Name of Contributor Registr Brandon Lynagh					er, if PAC
Street Address 1299 Avondale Road		Employer/Occupation/Labor Organization* Battleground Strategies / Consultant			Form (Cash, Check, etc.) Online
City Columbus	State	Zip Code 43212	Date (MM/DD/YYYY) 7/31/2019		Amount 100
Full Name of Contributor Mark Riddle				Registration Numb	er, if PAC
Street Address 2322 Veechdale Road		Employer/Occupation/Labor Organization* Self / Cosultatnt			Form (Cash, Check, etc.) Online
City Simpsonville	State KY •	Zip Code 40067	Date (MM/D	D/YYYY) 8/2/2019	Amount \$250
Full Name of Contributor Boggs for Ohio			•	Registration Numb	er, if PAC
Street Address 545 E. Town Street	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	Date (MM/D	D/YYYY) 7/30/2019	Amount \$250
Full Name of Contributor The Remmington Road Group, LLC				Registration Numb	er, if PAC
Street Address 34 N Remington Road	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Bexley	State	Zip Code 43209	Date (MM/D	D/YYYY) 10/14/2019	Amount \$250
Full Name of Contributor		Registration Num			er, if PAC
Street Address	Employe	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/D	D/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	\$850	