



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Joe Bizjak				
Full Name of Contributor Glen Dugger			Registration Number, if PAC	
Street Address 37 W. Broad St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 01/24/2019	Amount 50.00
Full Name of Contributor Angela White			Registration Number, if PAC	
Street Address 13216 Heimberger Rd. NW		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Baltimore	State OH	Zip Code 43105	Date (MM/DD/YYYY) 01/25/2019	Amount 250.00
Full Name of Contributor Penny Bayse			Registration Number, if PAC	
Street Address 8785 Linick Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 01/29/2019	Amount 50.00
Full Name of Contributor Richard Harris			Registration Number, if PAC	
Street Address 1100 Bedlington Ct.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 01/29/2019	Amount 100.00
Full Name of Contributor Mel Clemens			Registration Number, if PAC	
Street Address 6954 Furth Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 01/29/2019	Amount 100.00

*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)]