



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Reynoldsburg Educators PAC				
Full Name of Contributor Angie Bello			Registration Number, if PAC	
Street Address 16181 Lewis Rd.		Employer/Occupation/Labor Organization* Teacher		Form (Cash, Check, etc.) check 5517
City Sunbury	State OH	Zip Code 43074	Date (MM/DD/YYYY) 09/19/2019	Amount \$50.00
Full Name of Contributor Kelly Meddock-Brinkmeyer			Registration Number, if PAC	
Street Address 5615 Lanterns Way		Employer/Occupation/Labor Organization* Teacher		Form (Cash, Check, etc.) check 2777
City Orient	State OH	Zip Code 43146	Date (MM/DD/YYYY) 09/09/2019	Amount \$10.00
Full Name of Contributor Amy Fihe			Registration Number, if PAC	
Street Address 172 E. Walnut St		Employer/Occupation/Labor Organization* Teacher		Form (Cash, Check, etc.) check 3722
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 09/10/2019	Amount \$40.00
Full Name of Contributor Judith Helm			Registration Number, if PAC	
Street Address 6810 Shaulis Dr.		Employer/Occupation/Labor Organization* Teacher		Form (Cash, Check, etc.) check 2667
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY)	Amount \$20.00
Full Name of Contributor Chad Nairman			Registration Number, if PAC	
Street Address 4487 Candlewick Cir.		Employer/Occupation/Labor Organization* Teacher		Form (Cash, Check, etc.) check 1291
City Columbus	State OH	Zip Code 43230	Date (MM/DD/YYYY) 09/13/2019	Amount \$40.00

*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)]

Page Total **\$160.00**