



# Statement of Contributions Received

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Reynoldsburg Area Democrats PAC				
Full Name of Contributor Friends of Mack Quesenberry			Registration Number, if PAC	
Street Address 949 Lancaster Ave	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 11/30/2019	Amount 297.90
Full Name of Contributor Franklin County Adelante Democrats			Registration Number, if PAC	
Street Address 236 Hanford St	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	Date (MM/DD/YYYY) 10/26/2019	Amount 250.00
Full Name of Contributor Friends of Neal Whitman			Registration Number, if PAC	
Street Address 7916 Windrift Pl	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 10/16/2019	Amount 121.63
Full Name of Contributor Stacie A Baker			Registration Number, if PAC	
Street Address 1101 Bergenia Dr	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 10/12/2019	Amount 50.00
Full Name of Contributor Friends of Bhuwan Pyakurel			Registration Number, if PAC	
Street Address 8386 Ashlynd Pl	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	Date (MM/DD/YYYY) 10/16/2019	Amount 121.63

\*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)]