



## **Statement of Contributions Received**

Form 31-A

					ORC 3517.10
Full Name of Committee					
Reynoldsburg Republican Club					
Full Name of Contributor	Registration Number, if PAC				
Stephen Hicks					
Street Address	Employ	or Organization*		Form (Cash, Check, etc.)	
1481 Lancaster Avenue	l			Check	
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Reynoldsburg	ОН	43068		02/16/2018	40.00
Full Name of Contributor	<del>,,,!,</del> ,	<del></del>	<del></del>	Registration Number	er, if PAC
Penny Basye					
Street Address	Employ	er/Occupation/Lab	Form (Cash, Check, etc.)		
8765 Linick Drive				Check	
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Reynoldsburg	ОН	43068		03/05/2018	40.00
Full Name of Contributor	er, if PAC				
Barth Cotner					
Street Address	Employ	er/Occupation/Lab	or Organization*	<del></del>	Form (Cash, Check, etc.)
1862 Dugan Ct. SW			Cash		
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Reynoldsburg	ОН	43068		03/05/2018	40.00
Full Name of Contributor	Registration Number				
Contributions of \$25 or Less					
Street Address	Employ	er/Occupation/Lab	or Organization*	<u> </u>	Form (Cash, Check, etc.)
					Cash
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
	ОН			03/05/2018	20.00
Full Name of Contributor		<del></del>		Registration Numb	er, if PAC
Contributions of \$25 or Less					
Street Address	Employ	er/Occupation/Lab	Form (Cash, Check, etc.)		
			PayPal		
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
}	ОН			03/07/2018	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)]

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