OFFICE OF THE
Ohio Secretary of State

Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee
Reynoldsburg Area Democrats PAC

Full Name of Contributor		Registration Number, if PAC
Dennis Nicodemus		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
1146 Carousel Dr E		Check

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Reynoldsburg	OH	43068	01/21/2019	50.00

Full Name of Contributor		Registration Number, if PAC
Kristin J Bryant		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
387 Cheyenne Way		Check

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Reynoldsburg	OH	43068	01/21/2019	25.00

Full Name of Contributor		Registration Number, if PAC
Neal Whitman		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
7916 Windrift Pl		Check

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Reynoldsburg	OH	43068	01/21/2019	25.00

Full Name of Contributor		Registration Number, if PAC
Roger Cruse		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
989 Hillridge Rd		Check

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Reynoldsburg	OH	43068	02/18/2019	50.00

Full Name of Contributor		Registration Number, if PAC
Mildred M Johnson		

Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)
1931 Glenford Ct		Check

City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Reynoldsburg	OH	43068	02/18/2019	25.00

*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 175.00