



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Jim Lynch				
Full Name of Contributor Citizens for Kunze			Registration Number, if PAC	
Street Address 865 Macon Alley		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43206	Date (MM/DD/YYYY) 11/02/2017	Amount \$250.00
Full Name of Contributor Jeff Polesovsky			Registration Number, if PAC	
Street Address 2599 Henthorn Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 11/05/2017	Amount \$100.00
Full Name of Contributor James Lynch			Registration Number, if PAC	
Street Address 1828 Harwitch Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 11/28/2017	Amount \$500.00
Full Name of Contributor James Lynch			Registration Number, if PAC	
Street Address 1828 Harwitch Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 12/02/2017	Amount \$100.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY)	Amount

*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)]