



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee						
Citizens for Jim Lynch						
Full Name of Contributor Registration Numb				er, if PAC		
Mary and Thomas Katzenmeyer						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
250 West Spring Street, Unit 831					Check	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Columbus	ОН	43215		08/29/2017	\$250.00	
Full Name of Contributor		<u> </u>		Registration Number	er, if PAC	
Michael and Linda Stickney						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
PO Box 2581	Check					
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
Columbus	он	43216		08/29/2017	\$250.00	
Full Name of Contributor				Registration Number	er, if PAC	
John Aeager						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
					PayPal	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
	ОН			08/31/2017	\$250.00	
Full Name of Contributor Registration Num				er, if PAC		
Brett Paxton						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
2540 Andover Road	PayPal					
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
Upper Arlington	ОН	43221		08/31/2017	\$150.00	
ull Name of Contributor Registration Number				er, if PAC		
Mark Hummer						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
1795 Edgemont Road	Check					
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Upper Arlington	ОН	43212	09/02/2017 \$150.00			

Pag	e Total \$1,050.00

^{*}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)]