



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee							
Supporters of Sam Shim							
Full Name of Contributor	Registration Number, if PAC						
Jennifer Flint							
Street Address	Employer/	Occupation/Labor Org	ganization*	<u> </u>	Form (Cash, Check, etc.)		
6908 Perry Dr			Credit Card				
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount		
Worthington	ОН	43085		08/21/2017	50.00		
Full Name of Contributor			er, if PAC				
Troy Doucet							
Street Address	Employer/	Occupation/Labor Org	Form (Cash, Check, etc.)				
6636 Longshore St, Suite 401	Credit Card						
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount		
Dublin	ОН	43017		08/20/2017	25.00		
Full Name of Contributor	er, if PAC						
Stonewall Democrats of Central Ohio							
Street Address	Employer/	Occupation/Labor Org	ganization*		Form (Cash, Check, etc.)		
340 E Fulton St				Check			
City	State	Zip Code	Date (MM/DD/YYYY)		Amount		
Columbus	ОН	43215		08/07/2017	100.00		
Full Name of Contributor	er, if PAC						
Worthington Education Association - PAC	Education Association - PAC						
Street Address	Employer/	Occupation/Labor Org	Form (Cash, Check, etc.)				
6840 Downs St	1		Check				
City	State	Zip Code	Date (MM/DD/YYYY)		Amount		
Worthington	ОН	43085		10/07/2017	1000.00		
Full Name of Contributor	ntributor Registration Number						
b Ruhl							
Street Address	Employer/	Occupation/Labor Or	Form (Cash, Check, etc.)				
6820 Maxwelton Ct	Check						
City	State	Zip Code	Date (MM/DD/YYYY)		Amount		
Columbus	ОН	43235	09/17/2017		100.00		

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^{*}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)]