



## **Statement of Contributions Received**

Form 31-A

					ORC 3517.10	
Full Name of Committee						
Citizens for Johnson						
Full Name of Contributor Registration Numb					er, if PAC	
Cathy Johns for OhioTransfer funds remaining f	rom 2016	Senate candidacy				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
2475 Gershwin Avenue					check	
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
Grove City	ОН	43123		10/16/2017	4.569.67	
Full Name of Contributor	<del></del>	<del></del>		Registration Number	er, if PAC	
SWEA-EPAC		69-88				
Street Address	Employe	r/Occupation/Labor	Organization*	I	Form (Cash, Check, etc.)	
4074 Hoover Road	South-V	Vestern City Scho	ols Education	check		
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
Grove City	ОН	43123		10/111/2017	2,307.87	
Full Name of Contributor				Registration Number, if PAC		
Street Address	Employer/Occupation/Labor Organization*			<del></del>	Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/D	IM/DD/YYYY) Amount		
	ОН					
Full Name of Contributor Registration N		Registration Numb	umber, if PAC			
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
	ОН					
Full Name of Contributor	R			Registration Number, if PAC		
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	Date (MM/DD/YYYY) Amount		Amount	
·	ОН					

Page Total 6,877.44	

<sup>\*</sup>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)]