



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee						
CITIZENS FOR CHRIS R	LODRIC	HEZ				
					Registration Number, if PAC	
KIM MAGGARD						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
600 LINK ROAD	CITY OF WHITEHALL/MAYOR				CHECK	
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
WHITEHALL,	ОН	43213	07/	20/2017	250.00	
Full Name of Contributor	1			Registration Num	ber, if PAC	
DAN MILLER]		
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
4124 MAYFLOWER BLVD					CHECK	
City	State	Zip Code	Date (MM/D	•	Amount	
WHITEHALL,	ОН	43213	07/2	0117	250,00	
Full Name of Contributor		Registrat			tion Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*			l	Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
	ОН					
Full Name of Contributor				Registration Number, if PAC		
Street Address	Employer/Occupation/Labor Organization*			·	Form (Cash, Check, etc.)	
	[1	
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
	ОН					
Full Name of Contributor	····	· · · · · · · · · · · · · · · · · ·			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
_	ОН					

*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)]

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