



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Jim Lynch				
Full Name of Contributor Rob Nichols			Registration Number, if PAC	
Street Address 2885 Zollinger Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) \$150.00
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 06/08/2017	Amount PayPal
Full Name of Contributor William Guy			Registration Number, if PAC	
Street Address 2094 Edgemont Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43212	Date (MM/DD/YYYY) 06/08/2017	Amount \$250.00
Full Name of Contributor Paul Peterson			Registration Number, if PAC	
Street Address 4356 Shelbourne Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 06/08/2017	Amount \$250.00
Full Name of Contributor James and Susan Peppe			Registration Number, if PAC	
Street Address 1851 Collingswood Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 06/08/2017	Amount \$100.00
Full Name of Contributor Fundraiser - June 8, 2017			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	Date (MM/DD/YYYY) 06/08/2017	Amount \$4,920.00

*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)]