



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Jim Lynch				
Full Name of Contributor Gregory and Courtney Pearson			Registration Number, if PAC	
Street Address 2027 Wyandotte Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43212	Date (MM/DD/YYYY) 06/30/2017	Amount \$500.00
Full Name of Contributor John and Elizabeth Phillips			Registration Number, if PAC	
Street Address 1715 Bon Air Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Lexington	State KY	Zip Code 40502	Date (MM/DD/YYYY) 07/03/2017	Amount \$100.00
Full Name of Contributor Debbie Bower and George Richards			Registration Number, if PAC	
Street Address 4965 Oldbridge Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 07/03/2017	Amount \$500.00
Full Name of Contributor Stanford and Diana Brechbuhler			Registration Number, if PAC	
Street Address 1932 County Road 1155		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Ashland	State OH	Zip Code 44805	Date (MM/DD/YYYY) 07/10/2017	Amount \$500.00
Full Name of Contributor Jason Rafeld			Registration Number, if PAC	
Street Address 3877 Rushmore Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 07/10/2017	Amount \$200.00

*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)]