



# Statement of Contributions Received

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> Citizens for Jim Lynch				
Full Name of Contributor Andy Hardy			Registration Number, if PAC	
Street Address 3389 Ridge Gap Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Columbus	State OH	Zip Code 43221	Date (MM/DD/YYYY) 05/31/2017	Amount \$100.00
Full Name of Contributor Peter Walsh			Registration Number, if PAC	
Street Address 4271 Woodhall Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 05/31/2017	Amount \$100.00
Full Name of Contributor Robert and Susan Nichols			Registration Number, if PAC	
Street Address 3522 LaRochelle Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 05/31/2017	Amount \$100.00
Full Name of Contributor Gregory and Michelle Yoakam			Registration Number, if PAC	
Street Address 1941 Chelsea Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43212	Date (MM/DD/YYYY) 05/31/2017	Amount \$500.00
Full Name of Contributor Bret and Susan Hosket			Registration Number, if PAC	
Street Address 4274 Oxford Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 05/31/2017	Amount \$500.00

\*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)]