



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Committee to Elect Jim Roper				
Full Name of Contributor Jim Roper			Registration Number, if PAC	
Street Address 1183 Circle on the Green		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Columbus	State OH	Zip Code 43235	Date (MM/DD/YYYY) 10/23/2017	Amount 50.02
Full Name of Contributor Jim Roper			Registration Number, if PAC	
Street Address 1183 Circle on the Green		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Columbus	State OH	Zip Code 43235	Date (MM/DD/YYYY) 10/24/2017	Amount 228.92
Full Name of Contributor Jim Roper			Registration Number, if PAC	
Street Address 1183 Circle on the Green		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Columbus	State OH	Zip Code 43235	Date (MM/DD/YYYY) 10/25/2017	Amount 150.46
Full Name of Contributor Jim Roper			Registration Number, if PAC	
Street Address 1183 Circle on the Green		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Columbus	State OH	Zip Code 43235	Date (MM/DD/YYYY) 10/25/2017	Amount 75.23
Full Name of Contributor Jim Roper			Registration Number, if PAC	
Street Address 1183 Circle on the Green		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Cash
City Columbus	State OH	Zip Code 43235	Date (MM/DD/YYYY) 10/26/2017	Amount 1,372.00

*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)]