



## **Statement of Contributions Received**

Form 31-A

ORC 3517.10

Full Name of Committee					
Supporters of Sam Shim					
Full Name of Contributor Registration Numb					er, if PAC
Erica McLoughlin					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
3243 Tremont Rd				Credit Card	
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Columbus	он	43221		11/02/2017	50.00
Full Name of Contributor				Registration Number	er, if PAC
Kerry Dungan					
Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)				Form (Cash, Check, etc.)
1978 Roseberry Dr		Credit Card			
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Columbus	ОН	43220		11/02/2017	40.00
Full Name of Contributor	Registration Number, if PAC				
David Stack					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
2920 Jay Ave	Credit Card				
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Cleveland	ОН	44113	11/02/2017		50.00
Full Name of Contributor		1		Registration Number	er, if PAC
Roger Boge					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
7311 Maplewood Rd	Credit Card				
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Cleveland	ОН	44130		11/03/2017	25.00
Full Name of Contributor Registration Number					er, if PAC
Michelle Walker					
Street Address	Employer	/Occupation/Labor Or	Form (Cash, Check, etc.)		
5709 Killiney Ln		Credit Card			
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
Dublin	ОН	43016		11/03/2017	30.00

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<sup>\*</sup>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)]