

Statement of Contributions Received

Form 31-A

ORC 3517 10

					ORC 3517.10	
Full Name of Committee						
Supporters of Sam Shim						
Full Name of Contributor Registra				Registration Number	sistration Number, if PAC	
Yenny Tsao						
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
1249 Briarmeadow Dr	Ch				Check	
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount	
Columbus	ОН	43235		09/18/2017	30.00	
Full Name of Contributor		<u> </u>		Registration Number	er, if PAC	
Nellen Sutjipto						
Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)					
7594 Norham Rd	Check					
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
Columbus	ОН	43235		09/18/2017	30.00	
Full Name of Contributor	1			Registration Number	er, if PAC	
Stephanie Mok						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
4868 Medallion Dr W					Cash	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Westerville	ОН	43082		08/01/2017	20.00	
Full Name of Contributor	I	<u>.</u>		Registration Number	er, if PAC	
Po Chu						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
110 E Stanton Ave	Check					
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount	
Columbus	он	43214		08/02/2017	25.00	
ull Name of Contributor			<u> </u>	Registration Number, if PAC		
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount	
	ОН					

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^{*}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)]