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Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee						
Jan D. Heichel for Blendon Township Trustee					!	
Full Name of Contributor	Registration Number, if PAC					
John C. Belford						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
4856 Pleasant Woods Court	Blendon Township Police Dept.				check	
City	State	Zip Code	Date (MM/DD/YYYY)		Amount	
Columbus	ОН	43230		10/30/2017	200.00	
Full Name of Contributor		Regis		Registration Numb	egistration Number, if PAC	
	_					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
	la	T 2 :				
City	State OH	Zip Code	Date (MM/D	D/YYYY)	Amount	
Full Name of Contributor	I	Registration Nur			er, if PAC	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/D	DMYYY)	Amount	
	ОН					
Full Name of Contributor	·		Registration Nun		er, if PAC	
Street Address	Employer/Occupation/Labor Organization*			<u> </u>	Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/DI	D/YYY)	Amount	
	он					
Full Name of Contributor				Registration Number, if PAC		
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	Date (MM/DD/YYYY) Amount		Amount	
	OH					

*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)]

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