



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Jim Lynch				
Full Name of Contributor Todd Yaross			Registration Number, if PAC	
Street Address 1858 Bedford Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Upper Arlington	State OH	Zip Code 43212	Date (MM/DD/YYYY) 10/24/2017	Amount \$250.00
Full Name of Contributor Jeffery DeLeone			Registration Number, if PAC	
Street Address 2125 Cheshire Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/26/2017	Amount \$250.00
Full Name of Contributor William Napier			Registration Number, if PAC	
Street Address 2105 Fairfax Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/30/2017	Amount \$200.00
Full Name of Contributor Sandra Collins			Registration Number, if PAC	
Street Address 3234 Island Avenue		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Toledo	State OH	Zip Code 43614	Date (MM/DD/YYYY) 10/31/2017	Amount \$250.00
Full Name of Contributor John Zambito			Registration Number, if PAC	
Street Address 100 East Broad Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 11/01/2017	Amount \$50.00

*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)]