



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee					
Citizens for Jim Lynch					
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Full Name of Contributor Registration I					er, if PAC
Ann Hamilton					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
2592 Canterbury Road	i				PayPal
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Upper Arlington	ОН	43221		10/13/2017	\$200.00
Full Name of Contributor		<u>- </u>		Registration Number	er, if PAC
William Zimpher					
Street Address	Street Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)				
City	State	Zip Code	Date (MM/D	D/YYYY)	Amount
	он			10/14/2017	\$50.00
Full Name of Contributor Registration Number					er, if PAC
Brendan & Cara Boyle					
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
2655 Brandon Road					Cash
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Upper Arlington	он	43221	10/15/2017		\$20.00
Full Name of Contributor Registration Numb					er, if PAC
Erin Schumacher					
Street Address	Employe	er/Occupation/Labor	Form (Cash, Check, etc.)		
3104 Edgefield Road	PayPal				
City	State	Zip Code	Date (MM/DI	D/YYYY)	Amount
Upper Arlington	ОН	43221		10/16/2017	\$100.00
Full Name of Contributor Registration Number					er, if PAC
Steven English					
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)
1816 Upper Chelsea Road	PayPal				
City	State	Zip Code	Date (MM/DD/YYYY)		Amount
Upper Arlington	ОН	43221		10/17/2017 \$100.00	

Page 1	otal \$470.00	

^{*}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)]