



Statement of Contributions Received at a Social or Fund-Raising Event

Form 31-E
R.C. 3517.10(B)

Full Name of Committee Citizens for Jim Lynch				
Full Name of Contributor Greg Vergamini			Registration Number, if PAC	
Street Address 4081 Fenwick Road	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/08/2017	Amount \$150.00
City Upper Arlington	State OH	Zip Code 43220	Form (Cash, Check, Etc) Check	
Full Name of Contributor Brent and Tracy Harbold			Registration Number, if PAC	
Street Address 2727 Westmont Blvd.	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/08/2017	Amount \$50.00
City Upper Arlington	State OH	Zip Code 43221	Form (Cash, Check, Etc) Check	
Full Name of Contributor Rosemarie DeLibera			Registration Number, if PAC	
Street Address 2399 Brandon Road	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/08/2017	Amount \$20.00
City Upper Arlington	State OH	Zip Code 43221	Form (Cash, Check, Etc) Check	
Full Name of Contributor Eric Trombold			Registration Number, if PAC	
Street Address 2247 Pinebrook Road	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/08/2017	Amount \$125.00
City Upper Arlington	State OH	Zip Code 43220	Form (Cash, Check, Etc) Check	
Full Name of Contributor Craig and Park Zimpher			Registration Number, if PAC	
Street Address 2435 Coventry Road	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 06/08/2017	Amount \$100.00
City Upper Arlington	State OH	Zip Code 43221	Form (Cash, Check, Etc) Check	

* 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)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total Contributions This Event
\$4,920.00

Total Expenditures This Event
\$441.60

Page Total \$ **445.00**