



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Citizens for Jim Lynch				
Full Name of Contributor Jerry Kaltenbach			Registration Number, if PAC	
Street Address 1669 McCoy Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) PayPal
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 09/21/2017	Amount \$100.00
Full Name of Contributor Kasich for America			Registration Number, if PAC	
Street Address 250 North Cassady Avenue		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43209	Date (MM/DD/YYYY) 09/23/2017	Amount \$250.00
Full Name of Contributor John and Sharon Graver			Registration Number, if PAC	
Street Address 1190 Kenbrook Hill Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 09/23/2017	Amount \$150.00
Full Name of Contributor A.K. Pierce			Registration Number, if PAC	
Street Address 4660 Haymarket Court		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 09/25/2017	Amount \$250.00
Full Name of Contributor Edwin and Mary Overmyer			Registration Number, if PAC	
Street Address 2480 Stonehaven Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43220	Date (MM/DD/YYYY) 09/28/2017	Amount \$100.00

*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)]