



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

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

Full Name of Committee Friends of Meredith Lawson-Rowe				
Full Name of Contributor David Bentley			Registration Number, if PAC	
Street Address 3114 Heather Glen		Employer/Occupation/Labor Organization* unknown		Date (MM/DD/YYYY) 07/28/2019
City Springfield		State OH	Zip Code 45503	Amount \$20.00
Form (Cash, Check, Etc) cash				
Full Name of Contributor Pakhis Gattis			Registration Number, if PAC	
Street Address 3585 Forian		Employer/Occupation/Labor Organization* unknown		Date (MM/DD/YYYY) 07/28/2019
City Columbus		State OH	Zip Code 43219	Amount \$10.00
Form (Cash, Check, Etc) cash				
Full Name of Contributor Chris Miller			Registration Number, if PAC	
Street Address 1760 Southern Pkwy		Employer/Occupation/Labor Organization* unknown		Date (MM/DD/YYYY) 07/28/2019
City Springfield		State OH	Zip Code 45506	Amount \$10.00
Form (Cash, Check, Etc) cash				
Full Name of Contributor Sarah Miller			Registration Number, if PAC	
Street Address 950 S. Alcony Conover		Employer/Occupation/Labor Organization* unknown		Date (MM/DD/YYYY) 07/28/2019
City Troy		State OH	Zip Code 45373	Amount \$75.00
Form (Cash, Check, Etc) cash				
Full Name of Contributor Beth Cherry			Registration Number, if PAC	
Street Address 425 W. Parkwood Ave.		Employer/Occupation/Labor Organization* unknown		Date (MM/DD/YYYY) 07/28/2019
City Springfield		State OK	Zip Code 45506	Amount \$20.00
Form (Cash, Check, Etc) cash				

* 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
\$935.00

Total Expenditures This Event
\$0.00

Page Total \$ 135.00