

		7.4
Event Date	10/02/2019	Page //

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 Eddie Pauline					
Full Name of Contributor			Registration Number, if PAC		
Beau Arnason					
Street Address			tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
861 Neil Ave	Steiner + Associates; Developme		ociates; Developme	10/03/2019	\$100
City		State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43215	Check	artining to the second of the
Full Name of Contributor				Registration Number, if PAC	
Preisse Consulting LLC (Doug Preisse)					
Street Address	Employer	r/Occupat	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
41 S High St. Ste 3710	Self em	ployed		10/03/2019	\$250
City		State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43215	Check	
Full Name of Contributor			<u> </u>	Registration Number, if PAC	The state of the s
GMH Media, LTD (Gail Hogan)					
Street Address Er		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
7031 Foxmoor Place				10/03/2019	\$100
City		State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43235	Check	
Full Name of Contributor			Registration Number, if PAC		
Michael Dooley					
Street Address Employer/Occupation/Labor Organiza		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount	
176 Tucker Dr Retired		I		10/03/2019	\$100
City		State	Zip Code	Form (Cash, Check, Etc	
Worthington		ОН	43085	Online	
Full Name of Contributor				Registration Number, if PAC	
Steven Davidson					
Street Address Employ		oyer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
13267 East Letts Lane				10/03/2019	\$100
City		State	Zip Code	Form (Cash, Check, Etc	
Carmel		IN	46074	Check	
* Required for contributions from individuals over \$100	to statewic	de and Ge	eneral Assembly candida	ites. If contributor is self-employe	d, the occupation and the

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

Total Expenditure	es This Event

	660	
Page Total \$	050	

^{*} 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)]