



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

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

Ice Cream Social

Full Name of Committee Citizens For Robinette				
Full Name of Contributor Narc & Starklett Chesser			Registration Number, if PAC	
Street Address 4734 Bell Classic Dr	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/10/19	Amount \$100⁰⁰
City Grove City	State OH	Zip Code 43123	Form (Cash, Check, Etc) check	
Full Name of Contributor Matt & Kaylea Anner			Registration Number, if PAC	
Street Address 1114 Pinnacle Club Dr	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/06/19	Amount \$40⁰⁰
City Grove City	State OH	Zip Code 43123	Form (Cash, Check, Etc) check	
Full Name of Contributor Matthew & Sarah Abbi H			Registration Number, if PAC	
Street Address 1216 McClish Ct	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/11/19	Amount \$40⁰⁰
City Grove City	State OH	Zip Code 43123	Form (Cash, Check, Etc) check	
Full Name of Contributor Hank & Katie Gensler			Registration Number, if PAC	
Street Address 1618 Pinnacle Club Dr	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/16/19	Amount \$50⁰⁰
City Grove City	State OH	Zip Code 43123	Form (Cash, Check, Etc) check	
Full Name of Contributor Jacqueline Donovan			Registration Number, if PAC	
Street Address 1090 Pinnacle Club Dr	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09/16/19	Amount \$50⁰⁰
City Grove City	State OH	Zip Code 43123	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
\$340.00

Total Expenditures This Event

Page Total \$ **280.00**