



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

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

<b>Full Name of Committee</b> Shook For Reynoldsburg				
<b>Full Name of Contributor</b> Christine A. Smith			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 8334 Priestley Dr.	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 9/25/2019	<b>Amount</b> 25.00
<b>City</b> Reynoldsburg	<b>State</b> OH <input type="checkbox"/>	<b>Zip Code</b> 43068	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> J. Tom Shook			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 6958 Taylor Rd.	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 9/25/2019	<b>Amount</b> 50.00
<b>City</b> Reynoldsburg	<b>State</b> OH <input type="checkbox"/>	<b>Zip Code</b> 43068	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> David Branstool			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 6970 Concord Rd.	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 9/25/2019	<b>Amount</b> 50.00
<b>City</b> Alexandria	<b>State</b> OH <input type="checkbox"/>	<b>Zip Code</b> 43001	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> Edward G. Albertson			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 7700 Ballou Rd.	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 9/25/2019	<b>Amount</b> 100.00
<b>City</b> Heath	<b>State</b> OH <input type="checkbox"/>	<b>Zip Code</b> 43056	<b>Form (Cash, Check, Etc)</b> Check	
<b>Full Name of Contributor</b> Thomas C. Drabick, Jr.			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 982 Fortkort Dr.	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 9/25/2019	<b>Amount</b> 100.00
<b>City</b> Reynoldsburg	<b>State</b> OH <input type="checkbox"/>	<b>Zip Code</b> 43068	<b>Form (Cash, Check, Etc)</b> 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

Total Expenditures This Event

Page Total \$ 325.00