

Event Date	05/04/2019	Page 21

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

				R.C. 3517.10(B
			Registration Number, if PAC	
Employe	r/Occupa	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
1		-	05/04/2019	
];	State	Zip Code	Form (Cash, Check, Etc	
	ОН	45213	credit card	
			Registration Number, if PAC	
Employer	r/Occupat	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
i e		Č	· ·	
L ;	State	Zip Code		
		43068	check	
Name of Contributor		Registration Number if PAC		
			, , , , , ,	
Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount	
attorney		-	05/04/2019	[
T:	State	Zip Code	Form (Cash, Check, Etc	terne and the second
(	ОН	43068	cash	raine de la companya
<del></del>	-	<u> </u>	Registration Number, if PAC	
Employer	/Occupat	ion/Labor Organization*	Date (MM/DD/YYYY) Amount	
Wendy's	s		05/04/2019	\$20.00
	State	Zip Code	Form (Cash, Check, Etc	
C	ЭН	43068	cash	
			Registration Number, if PAC	
Employer	/Occupat	ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
unknown			05/04/2019	
[5	State	Zip Code	Form (Cash, Check, Etc	
	OH	43068	cash	
	Employer attorney  Employer attorney  Employer whendy'	Employer/Occupat attorney  Employer/Occupat attorney  State OH  Employer/Occupat Wendy's  State OH  Employer/Occupat	State Zip Code OH 45213  Employer/Occupation/Labor Organization* unknown  State Zip Code OH 43068  Employer/Occupation/Labor Organization* attorney  State Zip Code OH 43068  Employer/Occupation/Labor Organization* Wendy's  State Zip Code OH 43068  Employer/Occupation/Labor Organization* Wendy's  State Zip Code OH 43068  Employer/Occupation/Labor Organization* unknown  State Zip Code	State OH 45213 Form (Cash, Check, Etc credit card  Registration Number, if PAC  Employer/Occupation/Labor Organization* Date (MM/DD/YYYY)  unknown

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

<b>Total Contributions</b>	This	Event
\$435.00		

Total	Expenditures	This	Event

Page Total \$
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<sup>\*</sup> 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)]