



**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 <i>Citizens For Robinette</i>				
Full Name of Contributor <i>Tiffany &amp; John Black</i>			Registration Number, if PAC	
Street Address <i>5602 Platinum Dr</i>		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <i>09/22/19</i>
City <i>Grove City</i>		State <i>OH</i> <input checked="" type="checkbox"/>	Zip Code <i>43123</i>	Amount <i>\$40.00</i>
Form (Cash, Check, Etc) <i>Cash</i>				
Full Name of Contributor <i>Cindy Hester</i>			Registration Number, if PAC	
Street Address <i>1140 Pinnacle Club Dr</i>		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <i>09/22/19</i>
City <i>Grove City</i>		State <i>OH</i> <input checked="" type="checkbox"/>	Zip Code <i>43123</i>	Amount <i>\$50.00</i>
Form (Cash, Check, Etc) <i>check</i>				
Full Name of Contributor <i>Dave &amp; Lauren Arnold</i>			Registration Number, if PAC	
Street Address <i>5872 Goldstone Ct</i>		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <i>09/22/19</i>
City <i>Grove City</i>		State <i>OH</i> <input checked="" type="checkbox"/>	Zip Code <i>43123</i>	Amount <i>\$40.00</i>
Form (Cash, Check, Etc) <i>Cash</i>				
Full Name of Contributor <i>Julie Eckel</i>			Registration Number, if PAC	
Street Address <i>4565 Hirth Hill Rd</i>		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <i>09/22/19</i>
City <i>Grove City</i>		State <i>OH</i> <input checked="" type="checkbox"/>	Zip Code <i>43123</i>	Amount <i>\$40.00</i>
Form (Cash, Check, Etc) <i>Cash</i>				
Full Name of Contributor <i>Richard Hutchings</i>			Registration Number, if PAC	
Street Address <i>2954 Fox Barge Dr</i>		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <i>09/22/19</i>
City <i>Grove City</i>		State <i>OH</i> <input checked="" type="checkbox"/>	Zip Code <i>43123</i>	Amount <i>\$40.00</i>
Form (Cash, Check, Etc) <i>Check</i>				

\* 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 \$ *210.00*