



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 Meredith Lawson-Rowe				
Full Name of Contributor Jan Moore			Registration Number, if PAC	
Street Address 2435 Irwin Ave.	Employer/Occupation/Labor Organization* unknown		Date (MM/DD/YYYY) 07/28/2019	Amount \$25.00
City Springfield	State OH	Zip Code 45505	Form (Cash, Check, Etc) check	
Full Name of Contributor Amy Wellington			Registration Number, if PAC	
Street Address 220 Fair St.	Employer/Occupation/Labor Organization* unknown		Date (MM/DD/YYYY) 07/28/2019	Amount \$25.00
City Springfield	State OH	Zip Code 45506	Form (Cash, Check, Etc) check	
Full Name of Contributor Anna Cherry			Registration Number, if PAC	
Street Address 303 W. Perrin Ave.	Employer/Occupation/Labor Organization* unknown		Date (MM/DD/YYYY) 07/28/2019	Amount \$100.00
City Springfield	State OH	Zip Code 45506	Form (Cash, Check, Etc) check	
Full Name of Contributor Deborah Woods			Registration Number, if PAC	
Street Address 1811 Springmont	Employer/Occupation/Labor Organization* unknown		Date (MM/DD/YYYY) 07/28/2019	Amount \$25.00
City Springfield	State OH	Zip Code 45506	Form (Cash, Check, Etc) cash	
Full Name of Contributor Parst Harbour			Registration Number, if PAC	
Street Address 3001 Haverhill St.	Employer/Occupation/Labor Organization* unknown		Date (MM/DD/YYYY) 07/28/2019	Amount \$50.00
City Springfield	State OK	Zip Code 45503	Form (Cash, Check, Etc) cash	

* 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
\$935.00

Total Expenditures This Event
\$0.00

Page Total \$225.00