



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

				R.C. 3517.10(B)
Full Name of Committee				
Re-Elect Mike Et	pert			
Full Name of Contributor			Registration Number, if PAC	
Robert S. Wood 11				
Street Address	Employer/Occupati	on/Labor Organization*	Date (MM/DD/YYYY)	Amount 50
1952 Spring Mill City Canal Winduster			07-08-19	100-
City	1 . 1	Zip Code	Form (Cash, Check, Etc	
Canal Winduster	OH	43110	Check	
Full Name of Contributor			Registration Number, if PAC	
Patricia De Witt				-
Street Address	Employer/Occupati	on/Labor Organization*	Date (MM/DD/YYYY)	Amount 00
244 Old Coach Pl			07-09-19	80
City		Zip Code	Form (Cash, Check, Etc	
Canal Winchester	OH	43110	Check	
Full Name of Contributor			Registration Number, if PAC	•
Karen Styles				
Street Address	Employer/Occupati	on/Labor Organization*	Date (MM/DD/YYYY)	Amount 00
323 N. Sarari D-		7	07-09-19	150
City / / /	State	Zip Code	Form (Cash, Check, Etc	
Street Address 323 N. Sarari D City Canal Winchester	OH	43/10	Check	
Full Name of Contributor			Registration Number, if PAC	
Carolyn Ebert				
Street Address*	Employer/Occupati	on/Labor Organization*	Date (MM/DD/YYYY)	Amount
253 Old Coach Pl			07-09-19	174
City	State	Zip Code	Form (Cash, Check, Etc	
Canal Winchester	ÓH	43/10	Check	
Full Name of Contributor			Registration Number, if PAC	
Zella Swindall Street Address 2286 Williams Rd	/			
Street Address	Employer/Occupati	on/Labor Organization*	Date (MM/DD/YYYY)	Amount 🕠
2286 Williams Rd			07-09-19	100
City	State	Zip Code	Form (Cash, Check, Etc	
Co/5	OH	43007	Check	
* Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, the occupation and the				

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 th
event in the date column	

Total Contributions	This_Event

Total Expenditures This Event

Page Total \$_ 60 0 ~

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)]