



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

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

Full Name of Committee Spalding for New Albany				
Full Name of Contributor Andrew and Naomi Maletz			Registration Number, if PAC	
Street Address 4075 W CHELSEA GREEN	Employer/Occupation/Labor Organization* Maltez Architects		Date (MM/DD/YYYY) 11/12/2019	Amount \$150.00
City New Albany	State OH	Zip Code 43054	Form (Cash, Check, Etc) check	
Full Name of Contributor David Martin			Registration Number, if PAC	
Street Address 259 W. Schrock Rd.	Employer/Occupation/Labor Organization* Stewart Title		Date (MM/DD/YYYY) 11/12/2019	Amount \$100.00
City Westerville	State OH	Zip Code 43081	Form (Cash, Check, Etc) check	
Full Name of Contributor Jason Mauk			Registration Number, if PAC	
Street Address 5001 Hearthstone Park Dr.	Employer/Occupation/Labor Organization* Credo		Date (MM/DD/YYYY) 11/12/2019	Amount \$500.00
City New Albany	State OH	Zip Code 43054	Form (Cash, Check, Etc) check	
Full Name of Contributor John McClelland			Registration Number, if PAC	
Street Address 7626 Alpath Road	Employer/Occupation/Labor Organization* Trimac Advisors		Date (MM/DD/YYYY) 11/12/2019	Amount \$500.00
City New Albany	State OH	Zip Code 43054	Form (Cash, Check, Etc) check	
Full Name of Contributor Matthew and Patricia McClimon			Registration Number, if PAC	
Street Address 4433 MIDDLE ASPINWALL	Employer/Occupation/Labor Organization* Waggenbrenner		Date (MM/DD/YYYY) 11/12/2019	Amount \$150.00
City New Albany	State OH	Zip Code 43054	Form (Cash, Check, Etc) 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 \$ 1400.00