



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

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

Full Name of Committee <u>Friends of Michael Horneich</u>				
Full Name of Contributor <u>Robert Renner</u>			Registration Number, if PAC	
Street Address <u>375 Woodmark Run</u>		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>09/12/2019</u>
City <u>Gahanna</u>		State <u>OH</u>	Zip Code <u>43230</u>	Amount <u>\$50.00</u>
Form (Cash, Check, Etc) <u>Check</u>				
Full Name of Contributor <u>Daphne Moehring</u>			Registration Number, if PAC	
Street Address <u>441 Lily Pond Court</u>		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>09/12/2019</u>
City <u>Gahanna</u>		State <u>OH</u>	Zip Code <u>43230</u>	Amount <u>\$250.00</u>
Form (Cash, Check, Etc) <u>Check</u>				
Full Name of Contributor <u>Rick Sahli</u>			Registration Number, if PAC	
Street Address <u>981 Pinewood Lane</u>		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>09/12/2019</u>
City <u>Gahanna</u>		State <u>OH</u>	Zip Code <u>43230</u>	Amount <u>\$150.00</u>
Form (Cash, Check, Etc) <u>Check</u>				
Full Name of Contributor <u>Stephen Renner</u>			Registration Number, if PAC	
Street Address <u>740 Quaker Ridge Ct.</u>		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>09/12/2019</u>
City <u>Gahanna</u>		State <u>OH</u>	Zip Code <u>43230</u>	Amount <u>\$150.00</u>
Form (Cash, Check, Etc) <u>Check</u>				
Full Name of Contributor <u>Contributors of \$25 or Less</u>			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>09/12/2019</u>
City		State <u>OH</u>	Zip Code	Amount <u>\$95.00</u>
Form (Cash, Check, Etc)				

* 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 \$ 695.00