



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

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

Full Name of Committee <u>Klingler for Bexley City Council</u>				
Full Name of Contributor <u>Lawrence Abramson</u>			Registration Number, if PAC	
Street Address <u>695 Bryden Rd.</u>	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>08/24/2019</u>	Amount <u>\$100.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43205</u>	Form (Cash, Check, Etc) <u>check</u>	
Full Name of Contributor <u>Joann Strasser</u>			Registration Number, if PAC	
Street Address <u>2466 Bryden Rd.</u>	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>08/24/2019</u>	Amount <u>\$100.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43209</u>	Form (Cash, Check, Etc) <u>check</u>	
Full Name of Contributor <u>Michael Meissner</u>			Registration Number, if PAC	
Street Address <u>2232 Bryden Rd.</u>	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>08/24/2019</u>	Amount <u>\$50.00</u>
City <u>Bexley</u>	State <u>OH</u>	Zip Code <u>43209</u>	Form (Cash, Check, Etc) <u>check</u>	
Full Name of Contributor <u>Michael Klingler</u>			Registration Number, if PAC	
Street Address <u>6422 Johanne St.</u>	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>08/24/2019</u>	Amount <u>\$75.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43229</u>	Form (Cash, Check, Etc) <u>check</u>	
Full Name of Contributor <u>Jessica Doon</u>			Registration Number, if PAC	
Street Address <u>563 Blenheim Rd.</u>	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>08/24/2019</u>	Amount <u>\$25.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43214</u>	Form (Cash, Check, Etc) <u>check</u>	

* 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
\$1,045.00

Total Expenditures This Event
\$250.35

Page Total \$ 350.00