



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

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

Full Name of Committee Shook For Reynoldsburg				
Full Name of Contributor Joye Saunders			Registration Number, if PAC	
Street Address 3586 Bremen St.	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 6/27/2019	Amount 20.00
City Columbus	State OH <input type="checkbox"/>	Zip Code 43229	Form (Cash, Check, Etc) Cash	
Full Name of Contributor Gabriella Williams			Registration Number, if PAC	
Street Address 107 S. Terrace Ave.	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 6/27/2019	Amount 60.00
City Columbus	State OH <input type="checkbox"/>	Zip Code 43204	Form (Cash, Check, Etc) Cash	
Full Name of Contributor George Leach			Registration Number, if PAC	
Street Address 100 E. Main St.	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 6/27/2019	Amount 50.00
City Columbus	State OH <input type="checkbox"/>	Zip Code 43215	Form (Cash, Check, Etc) Cash	
Full Name of Contributor Richanne Zymkoski			Registration Number, if PAC	
Street Address 2128 Poplar	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 6/27/2019	Amount 100.00
City Obetz	State OH <input type="checkbox"/>	Zip Code 43207	Form (Cash, Check, Etc) Cash	
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
City	State <input type="checkbox"/>	Zip Code	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
\$ 1,055.00

Total Expenditures This Event

Page Total \$ 230.00