



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

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

<b>Full Name of Committee</b> Jadwin for Gahanna				
<b>Full Name of Contributor</b> Mark A. Thomas			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 1308 Totten Dr.	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 8/22/2019	<b>Amount</b> 300.00
<b>City</b> New Albany	<b>State</b> OH	<b>Zip Code</b> 43054	<b>Form (Cash, Check, Etc)</b> check	
<b>Full Name of Contributor</b> Brenda Hoffman			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 279 Highmeadow Dr.	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 08/22/2019	<b>Amount</b> 200.00
<b>City</b> Gahanna	<b>State</b> OH	<b>Zip Code</b> 43230	<b>Form (Cash, Check, Etc)</b> check	
<b>Full Name of Contributor</b> Karen Chrobak			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 725 Hunters Run	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 8/22/2019	<b>Amount</b> 250.00
<b>City</b> Gahanna	<b>State</b> OH	<b>Zip Code</b> 43230	<b>Form (Cash, Check, Etc)</b> check	
<b>Full Name of Contributor</b> Jeanne Gokcen			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 474 Whitley Dr.	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 08/22/2019	<b>Amount</b> 250.00
<b>City</b> Gahanna	<b>State</b> OH	<b>Zip Code</b> 43230	<b>Form (Cash, Check, Etc)</b> check	
<b>Full Name of Contributor</b> Elizabeth Burba			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 384 Dunbarton	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 08/22/2019	<b>Amount</b> 50.00
<b>City</b> Gahanna	<b>State</b> OH	<b>Zip Code</b> 43230	<b>Form (Cash, Check, Etc)</b> 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

2650.00

Total Expenditures This Event

Page Total \$ 1050.00