



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 Marshall and Lauren Spalding			Registration Number, if PAC	
Street Address 1940 Glenford Court	Employer/Occupation/Labor Organization* retired		Date (MM/DD/YYYY) 11/12/2019	Amount \$500.00
City Reynoldsburg	State OH	Zip Code 43068	Form (Cash, Check, Etc) check	
Full Name of Contributor Francis and Leigh Ann Strahler			Registration Number, if PAC	
Street Address 4186 James River Rd	Employer/Occupation/Labor Organization* Engineer		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 Tom Taneff			Registration Number, if PAC	
Street Address 250 Civic Center Dr., Suite 21	Employer/Occupation/Labor Organization* Taneff Law - attorney		Date (MM/DD/YYYY) 11/12/2019	Amount \$100.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, Etc) check	
Full Name of Contributor Tony and Kate Thomas			Registration Number, if PAC	
Street Address 220 Market St., Ste. 201	Employer/Occupation/Labor Organization* New Albany Realty		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 E.J. Thomas			Registration Number, if PAC	
Street Address 8711 Belworth SQ	Employer/Occupation/Labor Organization* Habitat for Humanity		Date (MM/DD/YYYY) 11/12/2019	Amount \$100.00
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 \$ 1000.00