



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

Form 31-E

					R.C. 3517.10(B)			
Full Name of Committee								
Friends of Greta Kearns for Grandview								
Full Name of Contributor	Registration Number, if PAC							
Susanne P Brooks								
Street Address Em		mployer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount			
1000 Urlin Ave #2008				, , , , , , , , , , , , , , , , , , ,	150.00			
City		State	Zip Code	Form (Cash, Check, Etc	• •			
Grandview Heights	1	ОН	43212	check				
Full Name of Contributor			<u> </u>	Registration Number, if PAC				
Ted Celeste								
Street Address Emplo		oyer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount			
1230 Oakland Ave				09/20/2017	50.00			
City		State	Zip Code	Form (Cash, Check, Etc	The State of the Co			
Grandview Heights)	ОН	43212	check				
Full Name of Contributor				Registration Number, if PAC				
Richard Wolever								
Street Address Employe		oyer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount			
403 Gulf Way, Apt 403				09/20/2017	100.00			
City	· ·	State	Zip Code	Form (Cash, Check, Etc	English Committee			
St Petersburg	}	FL	33706	check				
Full Name of Contributor				Registration Number, if PAC				
Karen Bell								
Street Address Employ		oyer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount			
1000 Urlin Ave, Apt 2205				09/20/2017	100.00			
City	<u> </u>	State	Zip Code	Form (Cash, Check, Etc	74.75			
Grandview Heights		ОН	43212	check				
Full Name of Contributor	Registration Number, if PAC							
Kim Seibert								
Street Address Employe		er/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount			
1000 Urlin Ave, #610			-	09/20/2017	250.00			
City		State	Zip Code	Form (Cash, Check, Etc				
Grandview Heights		ОН	43212	check				

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

Pane	Total \$	650.00		
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^{*} 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)]