



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

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

Full Name of Committee <u>Schottke for GC</u>				
Full Name of Contributor <u>Robert Whittier</u>			Registration Number, if PAC	
Street Address <u>3004 Crabapple Pl</u>	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) <u>06/27/2019</u>	Amount <u>50.00</u>	
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	Form (Cash, Check, Etc) <u>Check</u>	
Full Name of Contributor <u>Richard Stage</u>			Registration Number, if PAC	
Street Address <u>2733 Woodgrove Dr.</u>	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) <u>06/27/2019</u>	Amount <u>50.00</u>	
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	Form (Cash, Check, Etc) <u>check</u>	
Full Name of Contributor <u>George Holinga</u>			Registration Number, if PAC	
Street Address <u>4523 Hirth Hill Rd E</u>	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) <u>06/27/2019</u>	Amount <u>100.00</u>	
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	Form (Cash, Check, Etc) <u>Check</u>	
Full Name of Contributor <u>Kathleen Clark</u>			Registration Number, if PAC	
Street Address <u>2769 Buxton Ln</u>	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) <u>06/27/2019</u>	Amount <u>50.00</u>	
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	Form (Cash, Check, Etc) <u>Check</u>	
Full Name of Contributor <u>Mark Fuller</u>			Registration Number, if PAC	
Street Address <u>1422 Cascade Dr.</u>	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) <u>06/27/2019</u>	Amount <u>50.00</u>	
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</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

Total Expenditures This Event

Page Total \$ 300.00