31-E
R.C. 3517.10(B)

Event Date 10/01/19
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full					
Citizens Committee for Persons with DD					
Full Name of Contributor			Registration Number, if PAC		
Twinkle R. Schottke					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
4912 McNulty Street			10 01 19	80.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Grove City	OH	43123	check		
Full Name of Contributor			Registration Number, if PAC		
Jennifer Sue Schneid					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
1501 Norma Rd	N/A		10 01 19	40.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Columbus	OH	43229	check		
Full Name of Contributor			Registration Number, if PAC		
Jennifer R Sherick					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
17275 Allen Center Rd	N/A		10 01 19	80.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Marysville	OH	43040	check		
Full Name of Contributor			Registration Number, if PAC		
Kathie P. Skamfer					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
795 Pimlico Dr	N/A		10 01 19	40.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Gahanna	OH	43220	check		
Full Name of Contributor			Registration Number, if PAC		
Eileen M. Steele					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
799 S Cassingham Rd	N/A		10 01 19	40.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Bexley	OH	43209	check		
Full Name of Contributor			Registration Number, if PAC		
Darren H Thompson					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
41 Rundlet Ct	N/A		10 01 19	40.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Westerville	OH	43081	check		
Full Name of Contributor			Registration Number, if PAC		
ARC Industries					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
2879 Johnstown Rd	N/A		10 01 19	10,000.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Columbus	OH	43219	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 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 $ 10,320.00