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

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

Full Name of Contributor Larry Hotchkiss Street Address Street Address Columbus Employer/Occupation/Labor Organization* State Columbus State Columbus City Columbus Employer/Occupation/Labor Organization* OH 43215 Check Registration Number, if PAC Check Form (Cash, Check, Etc Check Check Registration Number, if PAC Street Address Employer/Occupation/Labor Organization* Street Address Employer/Occupation/Labor Organization* State City State City State Cip Code Form (Cash, Check, Etc Tipp City State Cip Code Form (Cash, Check, Etc FT EFT Full Name of Contributor Registration Number, if PAC Roger Synenberg Street Address Employer/Occupation/Labor Organization* Date (MM/DD/YYYY) Amount 12/01/2017 100.00	Full Name of Committee					
Larry Hotchkiss Street Address Employer/Occupation/Labor Organization* Date (MM/DD/YYYY) Amount 11/27/2017 250.00	Citizens for Mingo					
Steel Address Employer/Occupation/Labor Organization* Date (MM/DD/YYYY) Amount 11/27/2017 250.00	Full Name of Contributor				Registration Number, if PAC	
11/27/2017 250.00 251ate Zip Code Check Ch	Larry Hotchkiss					
State Zip Code Form (Cash, Check, Etc Check	Street Address	Employer/Occupation/Labor Organization*		on/Labor Organization*	Date (MM/DD/YYYY)	Amount
Columbus OH 43215 Check Full Name of Contributor Dan Muthard Registration Number, if PAC Street Address Employer/Occupation/Labor Organization Date (MM/DD/YYYY) Amount 1,000.00 City State DATE Address Zip Code OH Form (Cash, Check, Etc EFT Form (Cash, Check, Etc EFT Full Name of Contributor Roger Synenberg Street Address Employer/Occupation/Labor Organization* Date (MM/DD/YYYY) Amount 12/01/2017	1241 Dublin Rd				11/27/2017	250.00
Registration Number, if PAC	City		State	Zip Code	Form (Cash, Check, Etc	
Dan Muthard Street Address Employer/Occupation/Labor Organization* Date (MM/DD/YYYY) Amount 11/30/2017 1,000.00	Columbus		ОН	43215	Check	
Employer/Occupation/Labor Organization* Date (MM/DD/YYYY) Amount 11/30/2017 1,000.00	Full Name of Contributor				Registration Number, if PAC	
11/30/2017 1,000.00	Dan Muthard					
State Zip Code Form (Cash, Check, Etc	Street Address	Employe	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
Tipp City OH 45371 EFT Amount 100.00 Full Name of Contributor Roger Synenberg Employer/Occupation/Labor Organization* 2043 Random Rd Date (MM/DD/YYYY) Part 100.00 Amount 100.00 City State OH A4106 Check Form (Cash, Check, Etc Check Check Cleveland OH A4106 Check Registration Number, if PAC Full Name of Contributor Thomas Flesch Employer/Occupation/Labor Organization* 12/01/2017 Date (MM/DD/YYYY) Pack Amount 250.00 Street Address Employer/Occupation/Labor Organization* OH A3065 Form (Cash, Check, Etc Check Check City State OH A3065 Check Registration Number, if PAC Full Name of Contributor Robert Weiler Registration Number, if PAC Check Street Address Employer/Occupation/Labor Organization* 12/01/2017 Date (MM/DD/YYYY) Amount 1,000.00 Street Address Employer/Occupation/Labor Organization* 12/01/2017 Amount 1,000.00 City State Zip Code Form (Cash, Check, Etc Form (Cash, Check, Etc	914 Foxtail Circle			11/30/2017	1,000.00	
Full Name of Contributor Roger Synenberg Street Address 2043 Random Rd Employer/Occupation/Labor Organization* City Cleveland OH 44106 Employer/Occupation/Labor Organization* Check Registration Number, if PAC Form (Cash, Check, Etc Check Registration Number, if PAC Check Full Name of Contributor Thomas Flesch Street Address Employer/Occupation/Labor Organization* Street Address Employer/Occupation/Labor Organization* City State OH 43065 Form (Cash, Check, Etc Check Amount 12/01/2017 250.00 City Powell OH 43065 Check Registration Number, if PAC Check Full Name of Contributor Robert Weiler Street Address Employer/Occupation/Labor Organization* OH 43065 Check Amount 12/01/2017 Amount 1	City		State	Zip Code	Form (Cash, Check, Etc	
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Street Address Employer/Occupation/Labor Organization* Date (MM/DD/YYYY) Amount 12/01/2017 100.00 City State Zip Code OH 44106 Check Check Full Name of Contributor Thomas Flesch Employer/Occupation/Labor Organization* Date (MM/DD/YYYY) Amount 12/01/2017 250.00 City State Zip Code Form (Cash, Check, Etc Check Che	Full Name of Contributor			Registration Number, if PAC		
2043 Random Rd	Roger Synenberg					
City State Zip Code Check Form (Cash, Check, Etc Check Full Name of Contributor Thomas Flesch Street Address Employer/Occupation/Labor Organization* Date (MM/DD/YYYY) Amount 250.00 City Powell OH 43065 Check Check Full Name of Contributor Robert Weiler Street Address Employer/Occupation/Labor Organization* Date (MM/DD/YYYY) Amount 250.00 Full Name of Contributor Registration Number, if PAC Street Address Employer/Occupation/Labor Organization* Date (MM/DD/YYYY) Amount 250.00 Full Name of Contributor Registration Number, if PAC Street Address Date (MM/DD/YYYY) Amount 12/01/2017 1,000.00 State Zip Code Form (Cash, Check, Etc Date (MM/DD/YYYY) Amount 12/01/2017 1,000.00 Full Name of Contributor Date (MM/DD/YYYY) Amount 12/01/2017 1,000.00 State Zip Code Form (Cash, Check, Etc Date (MM/DD/YYYY) 1,000.00 Full Name of Contributor Date (MM/DD/YYYY) Amount 12/01/2017 State Zip Code Form (Cash, Check, Etc Date (MM/DD/YYYY) 1,000.00 Full Name of Contributor Date (MM/DD/YYYY) Amount 12/01/2017 State Zip Code Form (Cash, Check, Etc Date (MM/DD/YYYY) Full Name of Contributor Date (MM/DD/YYYY) Amount 12/01/2017 State Zip Code Form (Cash, Check, Etc Date (MM/DD/YYYY) Full Name of Contributor Date (M	Street Address	Employe	r/Occupat	ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
Cleveland Cleveland OH 44106 Check Registration Number, if PAC Registration Number, if PAC Registration Number, if PAC Street Address Street Address State Powell City Powell State Check Employer/Occupation/Labor Organization* OH 43065 Check Registration Number, if PAC Form (Cash, Check, Etc Check Registration Number, if PAC Registration Number, if PAC Check Full Name of Contributor Robert Weiler Street Address 10 N High St Employer/Occupation/Labor Organization* State Zip Code Form (Cash, Check, Etc Check Registration Number, if PAC Registration Number, if PAC Form (Cash, Check, Etc Form (Cash, Check, Etc Check Full Name of Contributor Robert Weiler Street Address 10 N High St Employer/Occupation/Labor Organization* State Zip Code Form (Cash, Check, Etc	2043 Random Rd				12/01/2017	100.00
Full Name of Contributor Thomas Flesch Street Address 595 Cardinal Hill Ln City Powell Full Name of Contributor Registration Number, if PAC State OH 43065 Form (Cash, Check, Etc Check Full Name of Contributor Robert Weiler Street Address 10 N High St State	City		State	Zip Code	Form (Cash, Check, Etc	
Street Address Street Address 595 Cardinal Hill Ln City Powell Full Name of Contributor Robert Weiler Street Address 10 N High St Employer/Occupation/Labor Organization* State Zip Code Form (Cash, Check, Etc Check OH 43065 Registration Number, if PAC Registration Number, if PAC Remount 12/01/2017 Amount 12/01/2017 Amount 12/01/2017 1,000.00	Cleveland		он	44106	Check	
Street Address 595 Cardinal Hill Ln City Powell Full Name of Contributor Robert Weiler Street Address Street Address Imployer/Occupation/Labor Organization* OH	Full Name of Contributor				Registration Number, if PAC	
595 Cardinal Hill Ln City Powell Form (Cash, Check, Etc OH 43065 Check Full Name of Contributor Robert Weiler Street Address 10 N High St Employer/Occupation/Labor Organization* State Zip Code How (MM/DD/YYYY) Amount 1,000.00 Form (Cash, Check, Etc Form (Cash, Check, Etc Form (Cash, Check, Etc) Form (Cash, Check, Etc) Amount 1,000.00	Thomas Flesch					
City Powell City Powell Full Name of Contributor Robert Weiler Street Address 10 N High St City State State Zip Code A3065 Check Registration Number, if PAC Registration Number, if PAC Amount 12/01/2017 1,000.00 State Zip Code Form (Cash, Check, Etc Form (Cash, Check, Etc Form (Cash, Check, Etc	Street Address	Employer/Occupation/Labor Organization*		ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
Powell Full Name of Contributor Robert Weiler Street Address 10 N High St Check Registration Number, if PAC Registration Number, if PAC Registration Number, if PAC Registration Number, if PAC Amount 12/01/2017 1,000.00 State Zip Code Form (Cash, Check, Etc	595 Cardinal Hill Ln		12/01/2017	250.00		
Full Name of Contributor Robert Weiler Street Address 10 N High St State Sta	City		State	Zip Code	Form (Cash, Check, Etc	
Robert Weiler Street Address Employer/Occupation/Labor Organization* Date (MM/DD/YYYY) Amount 12/01/2017 10 N High St State Zip Code Form (Cash, Check, Etc	Powell		ОН	43065	Check	
Street Address 10 N High St City Employer/Occupation/Labor Organization* Date (MM/DD/YYYY) Amount 12/01/2017 1,000.00	Full Name of Contributor			Registration Number, if PAC		
10 N High St 12/01/2017 1,000.00 City State Zip Code Form (Cash, Check, Etc	Robert Weiler					
City State Zip Code Form (Cash, Check, Etc	Street Address	Employer/Occupation/Labor Organization*		ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
	10 N High St				12/01/2017	1,000.00
Columbus OH 43215 Check	City	•	State	Zip Code	Form (Cash, Check, Etc	
	Columbus OH 43215		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	Total Expenditures This Event

Page Total \$	2,600.00	

^{*} 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)]