

Event Date: <u>03/22/2018</u> Page:

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

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

Full Name of Committee				. ,	
Committee to Re-elect Juc	tae Cill				
Full Name of Contributor	ige Gill			Dogistration Mumb :	f DAC
				Registration Number, if PAC	
Otto Beatty, III Street Address Employer/Occupation/Organization			MM/DD/YYYY	Amount	
		Employer occupation organization		1	\$25.00
206 E. Beck Street	Ctata	1	Zip Code	03/22/18 Form: Cash, Check, etc	\$20.00
City Columbus	State OH		43206	CHECK	
Full Name of Contributor			40200	Registration Number, i	f PAC
Chris Heckert				Registration Northber, 1	ITAC
Street Address Employer/Occupation/Organization				MM/DD/YYYY	Amount
71 Woodland Avenue			-,-,,	03/22/18	\$25.00
City	State		Zip Code	Form: Cash, Check, etc	\$20.00
Columbus	OH		43202	CHECK	
Full Name of Contributor	OII		10202	Registration Number, i	f PAC
Amanda Sims	Nogali di ini ini ini ini ini ini ini ini ini				
Street Address		Empl	oyer/Occupation/Organization	MM/DD/YYYY	Amount
164 Nursery Lane		1		03/22/18	\$25.00
City	State		Zip Code	Form: Cash, Check, etc	
Columbus	ОН		43206	CHECK	
Full Name of Contributor				Registration Number, if PAC	
Joy Hostetler				1	
Street Address		Emp	oyer/Occupation/Organization	MM/DD/YYYY	Amount
395 S. Broadleigh Road		1		03/22/18	\$25.00
City	State		Zip Code	Form: Cash, Check, etc	
Columbus	OH		43209	CHECK	
Full Name of Contributor				Registration Number, i	if PAC
Valeriya Kryvokolinska					
Street Address		Emp	loyer/Occupation/Organization	MM/DD/YYYY	Amount
1613 Yeardley Trail		<u>L_</u>		03/22/18	\$25.00
City	State		Zip Code	Form: Cash, Check, etc	
Columbus	ОН		43209	CHECK	
Full Name of Contributor				Registration Number, if PAC	
Mary Ansbro					
Street Address		Emp	loyer/Occupation/Organization	MM/DD/YYYY	Amount
6153 Cherry Hill Drive		<u> </u>		03/22/18	\$25.00
City	State		Zip Code	Form: Cash, Check, etc	
Columbus	ОН		43213	CHECK	". D. C.
Full Name of Contributor	Registration Number,	IT PAC			
Stewart Roberts	1.0000000000000000000000000000000000000	T			
Street Address		Emp	loyer/Occupation/Organization	MM/DD/YYYY	Amount 425 00
5142 Bressler Drive			Tr. C. d.	03/22/18 Form: Cash, Check, etc.	\$25.00
City	State		Zip Code	CHECK	
Columbus	ОН		43026	CHLCK	

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 No. 31-E" and list the date of the event in the date column.

* connotes court appointed expert or attorney/GAL list

** relative of court employee

Total Contributions This Event	Total Expenses This Event	17/
1		Page Total: \$ / 75