

	- 0			
Event Date	081	07/	17	Page 3

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 Lori Anr	Teibe	/			
			Registration Number, if PAC		
Howard Schottenstein					
Street Address	reet Address Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount	
2392 E. Main St.			08/09/2017	100.00	
City	State	Zip Code	Form (Cash, Check, Etc		
Bexley	OH	43209	chech		
Full Name of Contributor			Registration Number, if PAC		
Julith Brachman					
Street Address	Employer/Occur	pation/Labor Organization*	Date (MM/DD/YYYY)	Amount	
311 N. Drexel Ave.			08/09/2017	150.00	
City	State	Zip Code	Form (Cash, Check, Etc		
Bexley	OH	43209	chech		
Full Name of Contributor			Registration Number, if PAC		
Carol Luper					
Street Address Employer/Occupation/Labor Organization*			Date (MM/DD/YYYY)	Amount	
360 N. Columbia Ave			08/09/2017	150,00	
City	State	Zip Code	Form (Cash, Check, Etc		
Bexley	DH	43209	check		
Full Name of Contributor			Registration Number, if PAC		
Carol Fey					
Street Address	Employer/Occu	pation/Labor Organization*	Date (MM/DD/YYYY)	Amount	
176 S. Merkle Rd			08/09/2017	150.00	
City	State	Zip Code	Form (Cash, Check, Etc		
Bexley	OH	43209	paypa/		
Full Name of Contributor			Registration Number, if PAC		
Ashley Wade					
Street Address	Employer/Occu	pation/Labor Organization*	1 1 1	Amount	
Street Address 362 Granville St.			08/09/2017	100.00	
Newarh	State	Zip Code	Form (Cash, Check, Etc		
Newarn	OF	1 43055	check		
* Required for contributions from individuals over \$100	to statewide and	General Assembly candida	ates. If contributor is self-employ	red, the occupation and the	

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

Total Contributions	This	Event

Total Expenditures	This Eve	ent
}		

Page T	otal \$_	650	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)]