



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

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

Full Name of Committee Committee4Children				
Full Name of Contributor Bruce Cadwallader			Registration Number, if PAC	
Street Address 6549 Warriner Way	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05 21 19	Amount 70
City Canal Winchester	State OH <input type="checkbox"/>	Zip Code 43110	Form (Cash, Check, Etc) check	
Full Name of Contributor Janet Jackson			Registration Number, if PAC	
Street Address 2865 Castlewood Road	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05 21 19	Amount 495
City Columbus	State OH <input type="checkbox"/>	Zip Code 43209	Form (Cash, Check, Etc) check	
Full Name of Contributor Lara Laroche			Registration Number, if PAC	
Street Address 855 W. Mound Street	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05 21 19	Amount 600
City Columbus	State OH <input type="checkbox"/>	Zip Code 43215	Form (Cash, Check, Etc) check	
Full Name of Contributor Doris Calloway Moore			Registration Number, if PAC	
Street Address 833 Schillingwood Drive	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05 21 19	Amount 240
City Gahanna	State OH <input type="checkbox"/>	Zip Code 43230	Form (Cash, Check, Etc) check	
Full Name of Contributor Julie Murrell			Registration Number, if PAC	
Street Address 855 W. Mound Street	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05 21 19	Amount 150
City Columbus	State OH <input type="checkbox"/>	Zip Code 43223	Form (Cash, Check, Etc) 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 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 \$ 1,555