

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

Form 31-E

			K.C. 3517.10(B)
Full Name of Committee			
Schottke for 6C			
Full Name of Contributor		Registration Number, if PAC	
George HolingA			
Street Address	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY)	Amount
4523 Hirth Hiller	EAST	06/30/2018	100.00
City	State Zip Code	Form (Cash, Check, Etc	
Opove Ciny	0H- 43/23	Check	
Full Name of Contributor		Registration Number, if PAC	
Contributions \$25	or Les		
Street Address	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY)	Amount
		06/30/2018	40,00
City	State Zip Code	Form (Cash, Check, Etc	
	7 🗐	CASh	5.5
Full Name of Contributor		Registration Number, if PAC	The second secon
John BRANT			
Street Address	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY)	Amount
O 4 TO TO	Employon occupanos I care o o generales	1 1	30.00
Street Address 2605 BRYAN CIR		06/20/2018	30,00
	State Zip Code	Form (Cash, Check, Etc	
GROVE City	045/23	check	
Full Name of Contributor		Registration Number, if PAC	
Lanese for Ohio			
Street Address	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY)	Amount
260 N. CASSAdy Ave		06/30/2018	100.00
City	State Zip Code	Form (Cash, Check, Etc	
Columbus	94- 43209	Check	
Full Name of Contributor		Registration Number, if PAC	
Stage Con MANOR			
Street Address	Employer/Occupation/Labor Organization*	1 1 1	Amount
Street Address Y090 Haughn Rd.		06/30/2018	100.00
City	State Zip Code	Form (Cash, Check, Etc	
Grove Ciry	OH 43127	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 No. 31-E" and list the date of the event in the date column

Total Contributions This Event

Total Expenditures This Event

Page Total \$