



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

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

<b>Full Name of Committee</b> Friends of Merisa Bowers				
<b>Full Name of Contributor</b> Christine Cozad			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 2628 N. 4th Street	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 08/16/2019	<b>Amount</b> 100.00
<b>City</b> Columbus	<b>State</b> OH	<b>Zip Code</b> 43202	<b>Form (Cash, Check, Etc)</b> check	
<b>Full Name of Contributor</b> Mellissia Fuhrmann			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 1849 Willoway Circle N.	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 08/16/2019	<b>Amount</b> 50.00
<b>City</b> Columbus	<b>State</b> OH	<b>Zip Code</b> 43220	<b>Form (Cash, Check, Etc)</b> check	
<b>Full Name of Contributor</b> Bill Hedrick			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 535 W. 1st Ave	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 08/16/2019	<b>Amount</b> 25.00
<b>City</b> Columbus	<b>State</b> OH	<b>Zip Code</b> 43215	<b>Form (Cash, Check, Etc)</b> check	
<b>Full Name of Contributor</b> Robert Hockenberger Jr.			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 8612 Appleridge Circle	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 08/16/2019	<b>Amount</b> 50.00
<b>City</b> Pickerington	<b>State</b> OH	<b>Zip Code</b> 43147	<b>Form (Cash, Check, Etc)</b> check	
<b>Full Name of Contributor</b> Anonymous			<b>Registration Number, if PAC</b>	
<b>Street Address</b>	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 08/16/2019	<b>Amount</b> 51.00
<b>City</b>	<b>State</b> OH	<b>Zip Code</b>	<b>Form (Cash, Check, Etc)</b> cash	

\* 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 \$ 276.00